Sub Non Acute Community Care

USER'S MANUAL

hacc
home and community care
A JOINT COMMONWEALTH AND STATE/TERRITORY PROGRAM
PROVIDING FUNDING AND ASSISTANCE FOR AUSTRALIANS IN NEED

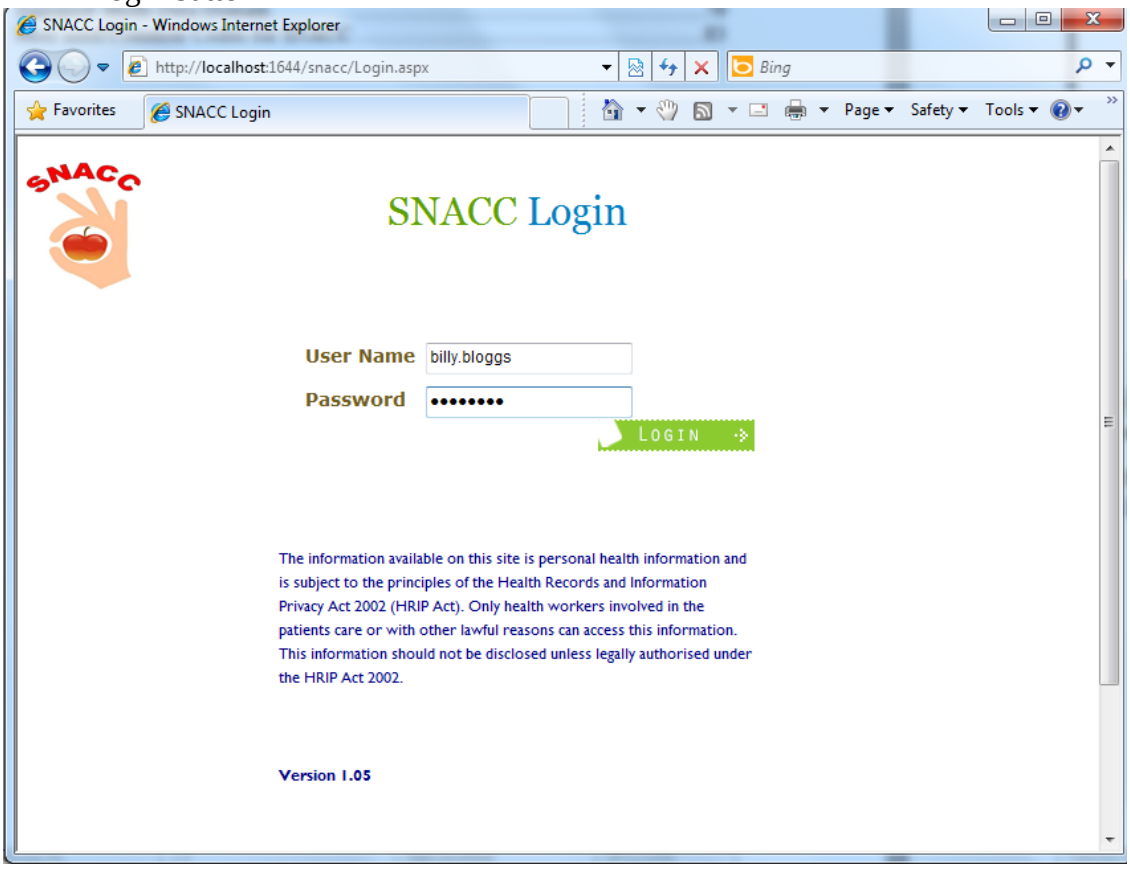
SNACC USER'S MANUAL

USER'S MANUAL 1
Logging onto snacc 4
Navigation of clinician screens 6
View Calendar by Month/Main Screen 6
All Episodes 8
Events 9
Recurring Events 9
Group Events 9
ACCR 10
Day Calendar 12
Timeline Calendar 13
Searching for a client 14
By MRN 15
By Name 15
Navigation of Client Screen 16
Demographics 16
Carer Screen 17
Contacts Screen 18
Current Episodes 19
All Episodes 19
Events Screen 19
ACCR Screen 20
Admin Stats Screen 20
Reports 21
ACAP KPIs Report 21
Area Structure Report 22
Blank Standard Referral Form and Blank ACRS Referral Form 23
Blank Recurring Event Form 24
Bulletin Board Report 25
Client Groups Report 25
Open Episodes Report 26
Events Per Day Report 27
WebNAP Extract 28
Adding/Editing a Client 31
Adding a new carer 32
Adding/Editing a contact 33
Adding/Editing an Episode 34
Adding/Editing Goods and Equipment 35
Adding/Editing a recurring event 38
Adding/Editing a Team Group 39
Administration Section 41
Administration Settings 41
Area 41
Facility 42
Provider Unit 43
Team 44
Staff 45
Agency 46
HACC Extracts 47
ACAT Extracts 48

Clinical Reference....48
Merge Clients....49
Bulletin Board....49
Security Levels....50
Differences between Case Management, Care Co-Ordination and Assessment....51
Lookup Tables....52
Accommodation....52
Benefit Status....52
Country of Birth....53
Carer for more than one person....56
Carer Residency Status....56
End Reason....56
Language Spoken At Home....58
Living Arrangement....60
Primary Assistance Received....60
Referral Source....60
Referral Target....60
Relationship of Carer to Client....62
Relationship of Contact to Client....62
Service Delivery Setting....62
Transport Mode....63
Type of Assistance with Goods and Equipment Received....63
Appendices....66
Who is a HACC Client....66
Attendance Status Data Domain....69
Main Reason for Cessation of Services Data Domain....71
Primary Type of Assistance Received Data Domain....74
Source of Referral Data Domain....79
Target of Referral Data Domain....82
Transport Mode Data Domain....84
Most used/Common Codes for SNACC....88

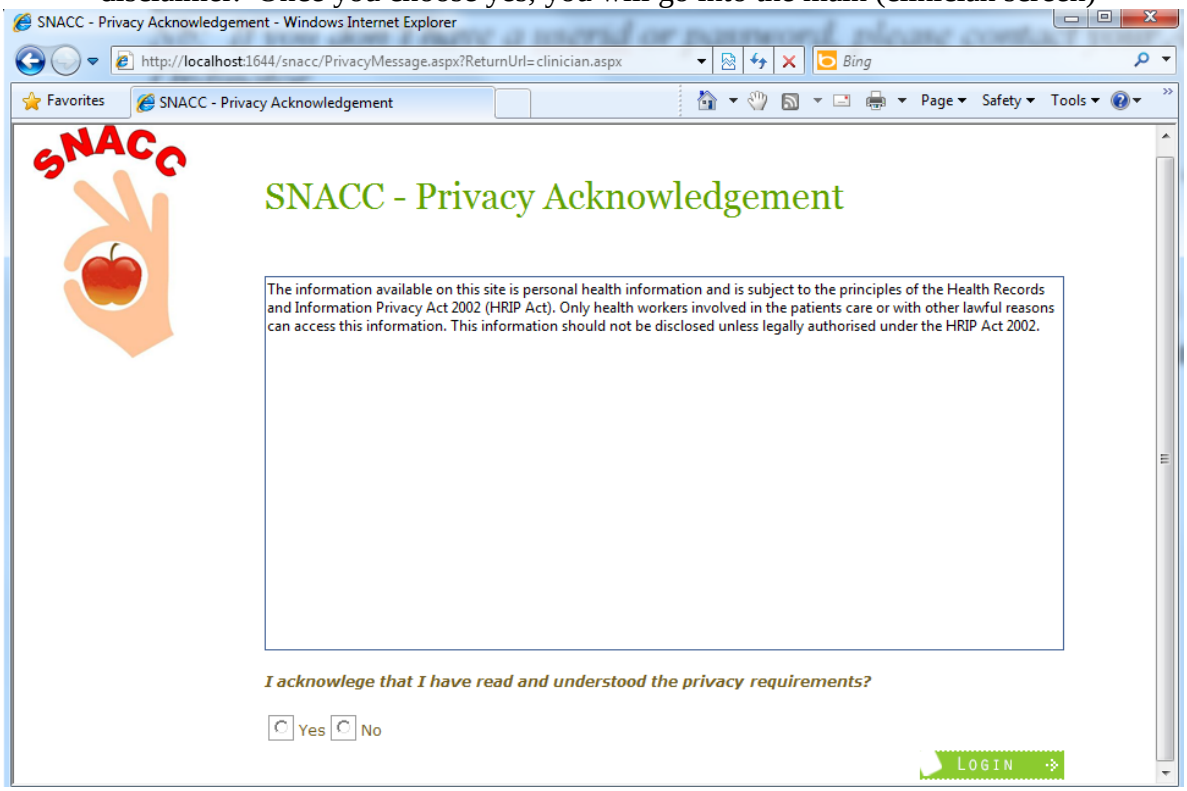
Logging onto snacc

- Click on the link or the icon provided by your respective Area Health Service
- Enter your allocated userid and password and either hit {enter} or click the login button


SNACC Login - Windows Internet Explorer
http://localhost:1644/snacc/Login.aspx
Bing
Favorites
SNACC Login
Page
Safety
Tools
SNACC
SNACC Login
User Name
billy.bloggs
Password
LOGIN
The information available on this site is personal health information and is subject to the principles of the Health Records and Information Privacy Act 2002 (HRIP Act). Only health workers involved in the patients care or with other lawful reasons can access this information. This information should not be disclosed unless legally authorised under the HRIP Act 2002.
Version 1.05

Nb: If you don't have a userid or password, please contact your Area HACC Co-Ordinator.

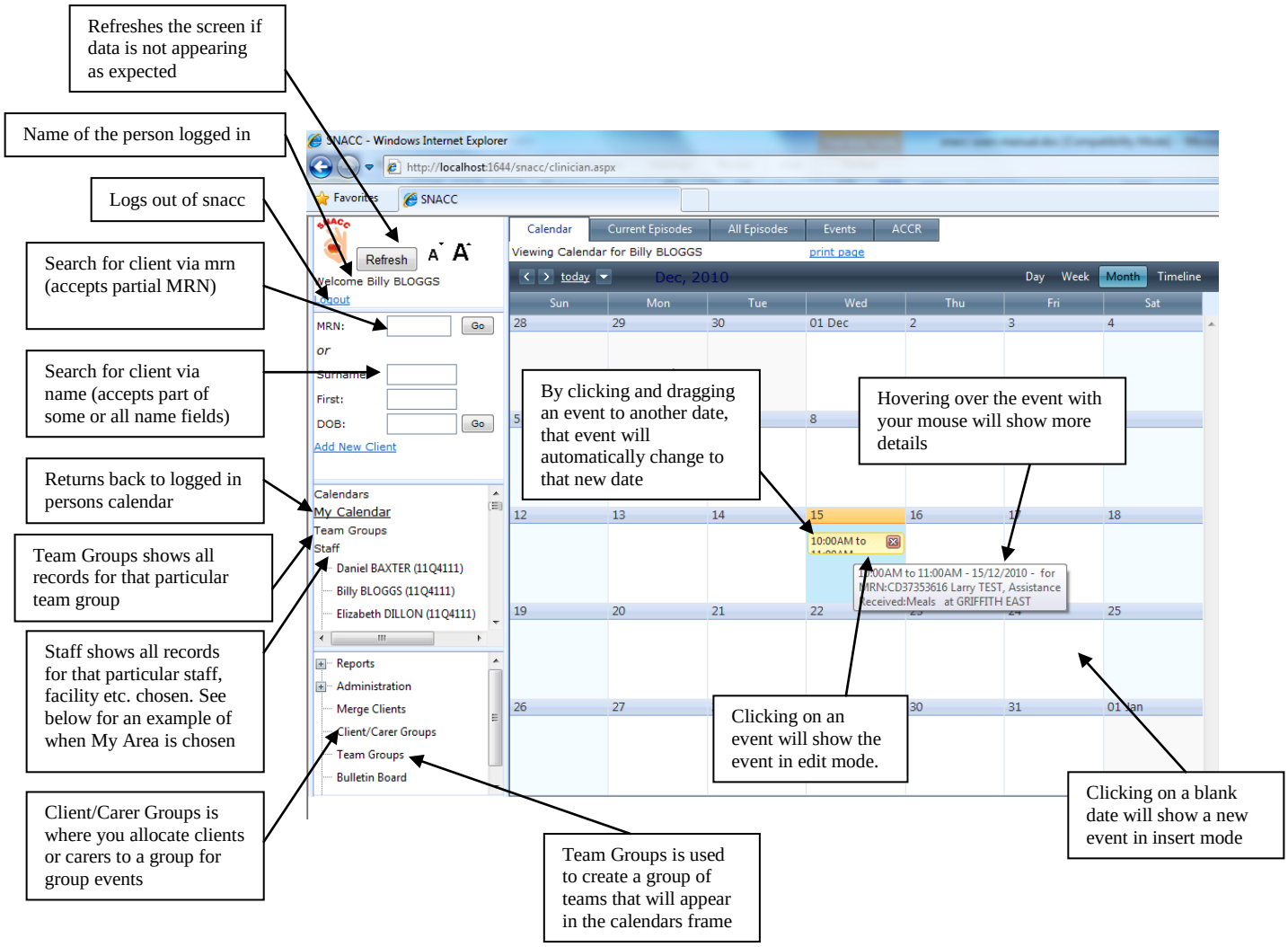
- The very first time you go into SNACC, you will be asked to agree with the disclaimer. Once you choose yes, you will go into the main (clinician screen)


SNACC - Privacy Acknowledgement - Windows Internet Explorer
http://localhost:1644/snacc/PrivacyMessage.aspx?ReturnUrl=clinician.aspx
Bing
Favorites
SNACC - Privacy Acknowledgement
Page
Safety
Tools
SNACC
SNACC - Privacy Acknowledgement
The information available on this site is personal health information and is subject to the principles of the Health Records and Information Privacy Act 2002 (HRIP Act). Only health workers involved in the patients care or with other lawful reasons can access this information. This information should not be disclosed unless legally authorised under the HRIP Act 2002.
I acknowlege that I have read and understood the privacy requirements?
Yes
No
LOGIN

Navigation of clinician screens

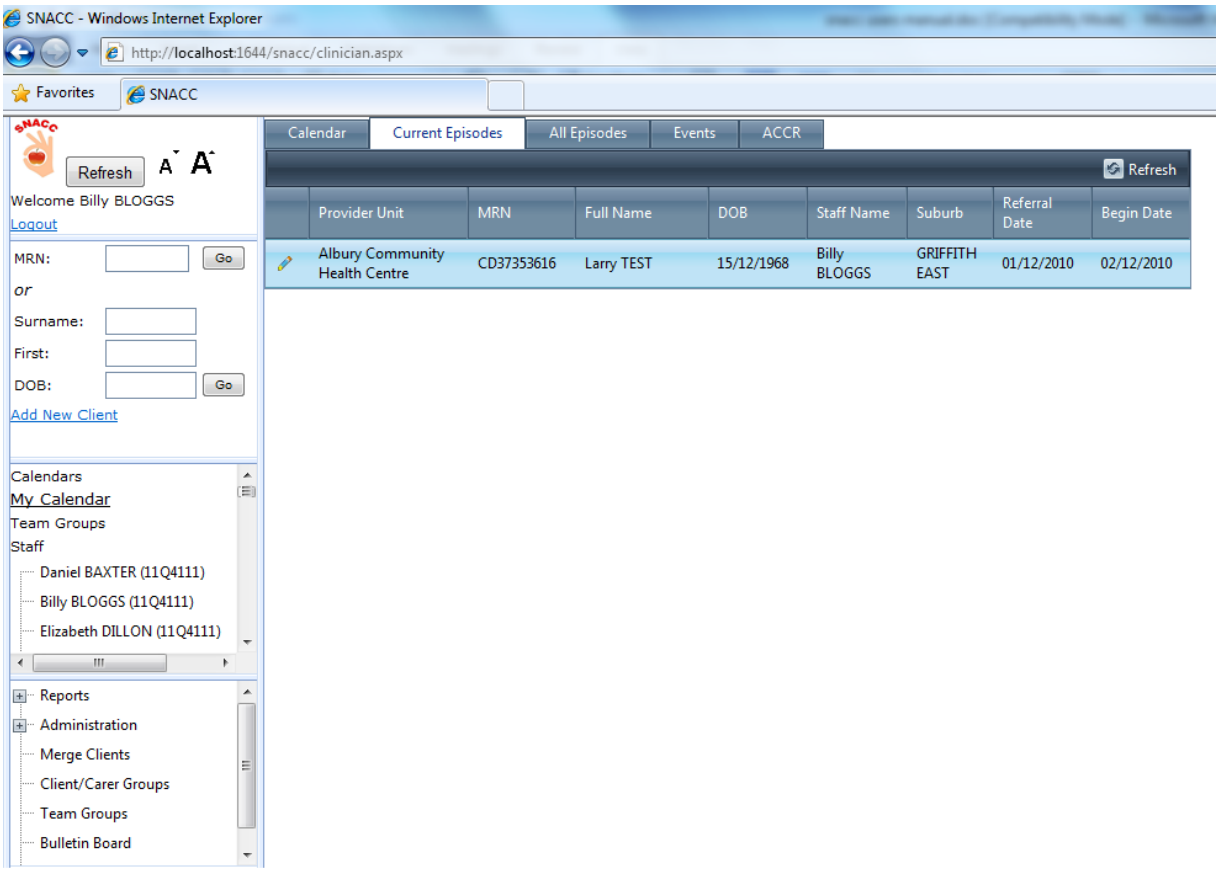
View Calendar by Month/Main Screen

- The first screen to appear will show the logged in users calendar for the month. As shown below, we can see that


Refreshes the screen if data is not appearing as expected
Name of the person logged in
Logs out of snacc
Search for client via mrn (accepts partial MRN)
Search for client via name (accepts part of some or all name fields)
Returns back to logged in persons calendar
Team Groups shows all records for that particular team group
Staff shows all records for that particular staff, facility etc. chosen. See below for an example of when My Area is chosen
Client/Carer Groups is where you allocate clients or carers to a group for group events
By clicking and dragging an event to another date, that event will automatically change to that new date
Hovering over the event with your mouse will show more details
Clicking on an event will show the event in edit mode.
Clicking on a blank date will show a new event in insert mode
Team Groups is used to create a group of teams that will appear in the calendars frame
SNACC - Windows Internet Explorer
Refresh
Welcome Billy BLOGGS
MRN:
Surname:
First:
DOB:
Add New Client
Calendars
My Calendar
Team Groups
Staff
Daniel BAXTER (11Q4111)
Billy BLOGGS (11Q4111)
Elizabeth DILLON (11Q4111)
Reports
Administration
Merge Clients
Client/Carer Groups
Team Groups
Bulletin Board
Calendar
Current Episodes
All Episodes
Events
ACCR
Viewing Calendar for Billy BLOGGS
print page
Dec, 2010
Day
Week
Month
Timeline

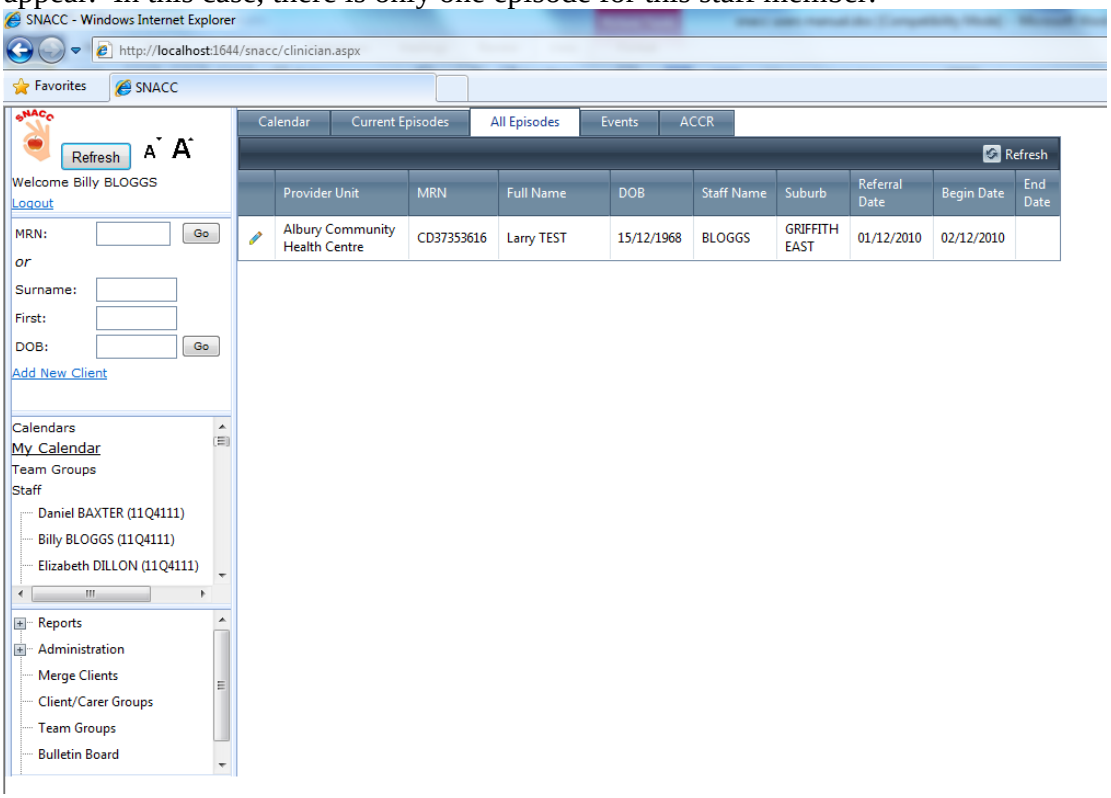
Current Episodes

By clicking on the tab next to Calendar, the Current Episodes screen will appear, showing all of that staff's current open episodes (ie: Episodes assigned to them with nothing in the episode end date)



All Episodes

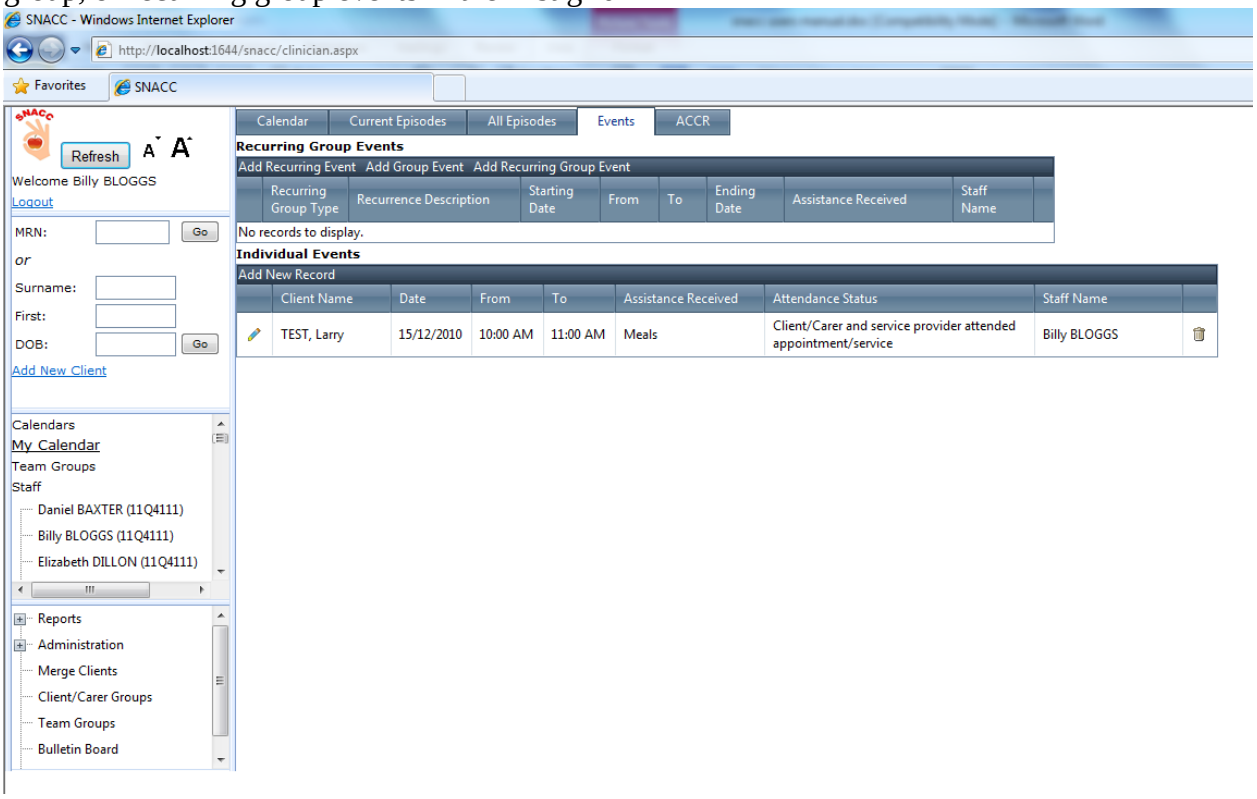
By clicking on the tab next to Current Episodes, all of that staff's episodes will appear. In this case, there is only one episode for this staff member.



NB: You can only add a new episode via the client screen because it would be very difficult to link a client to a new episode if we don't know the client already.

Events

This tab shows all individual events for the calendar chosen, as well as any recurring group, or recurring group events in the first grid



Recurring Events

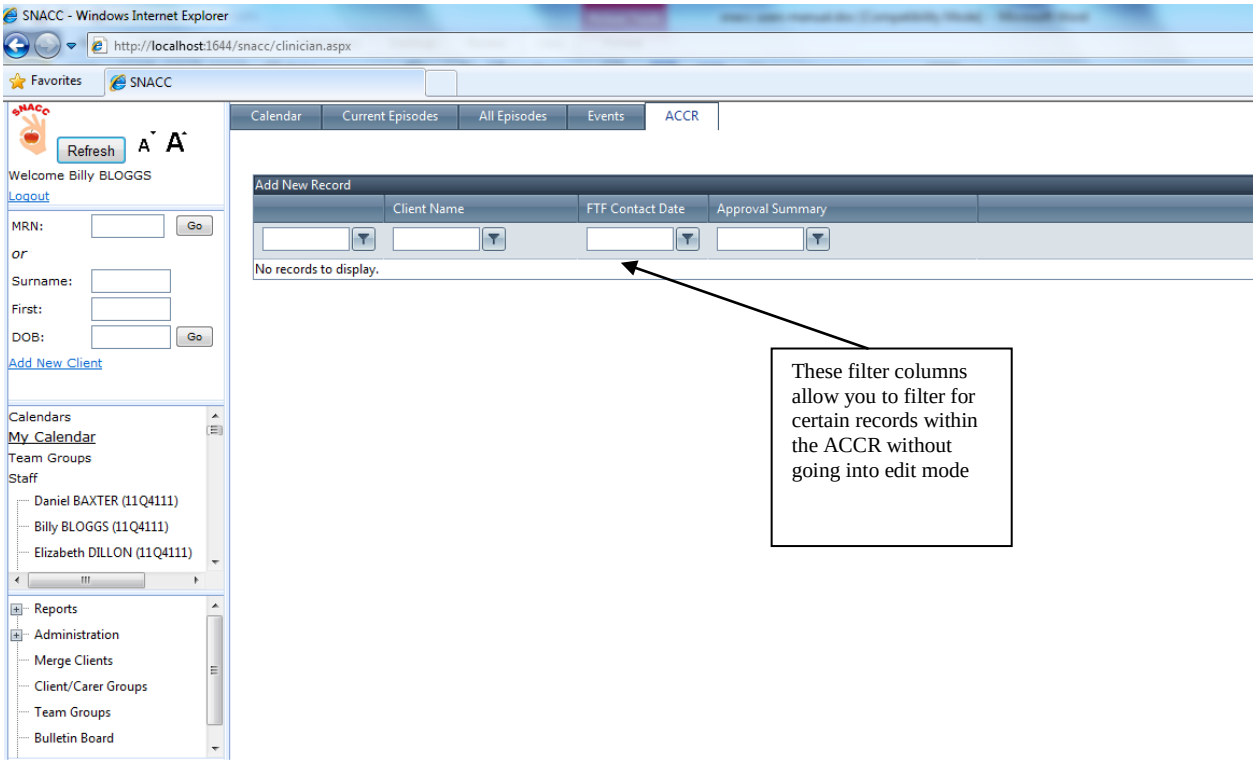
Events that are recurring events will not appear in the individual events grid because that would possibly make the individual events group impossibly long. The only way to individually change an event that is part of a recurring event is via the calendar

Group Events

Events that are group events will not appear in the individual events grid because that would possibly make the individual events group impossibly long. The only way to individually change an event that is part of a group event is via the calendar

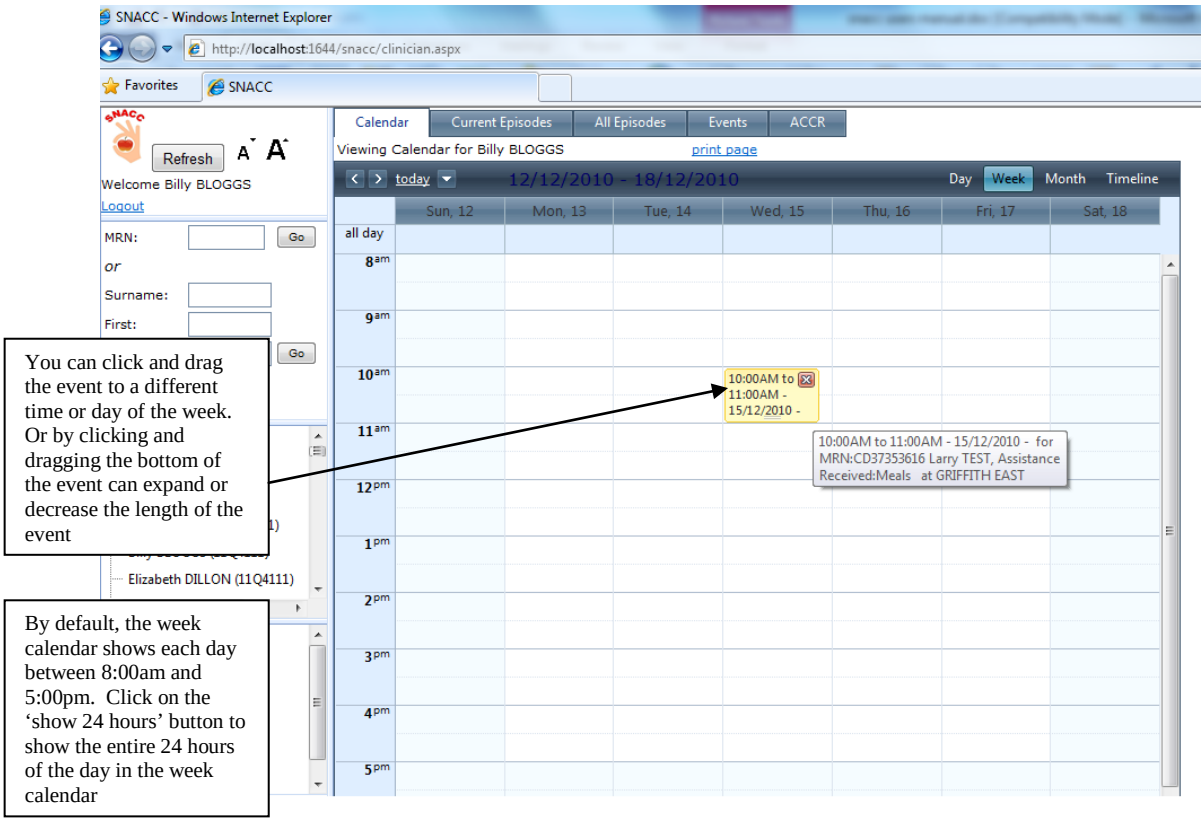
ACCR

The last tab on the main (clinician) screen is the ACCR tab, which shows all the ACCR's that particular staff member has dealt with. In this example, no ACCR's have been entered by this staff member



View Calendar by week

- By clicking on the week calendar, it will show you all events for each day of the week as well as the time that they occurred

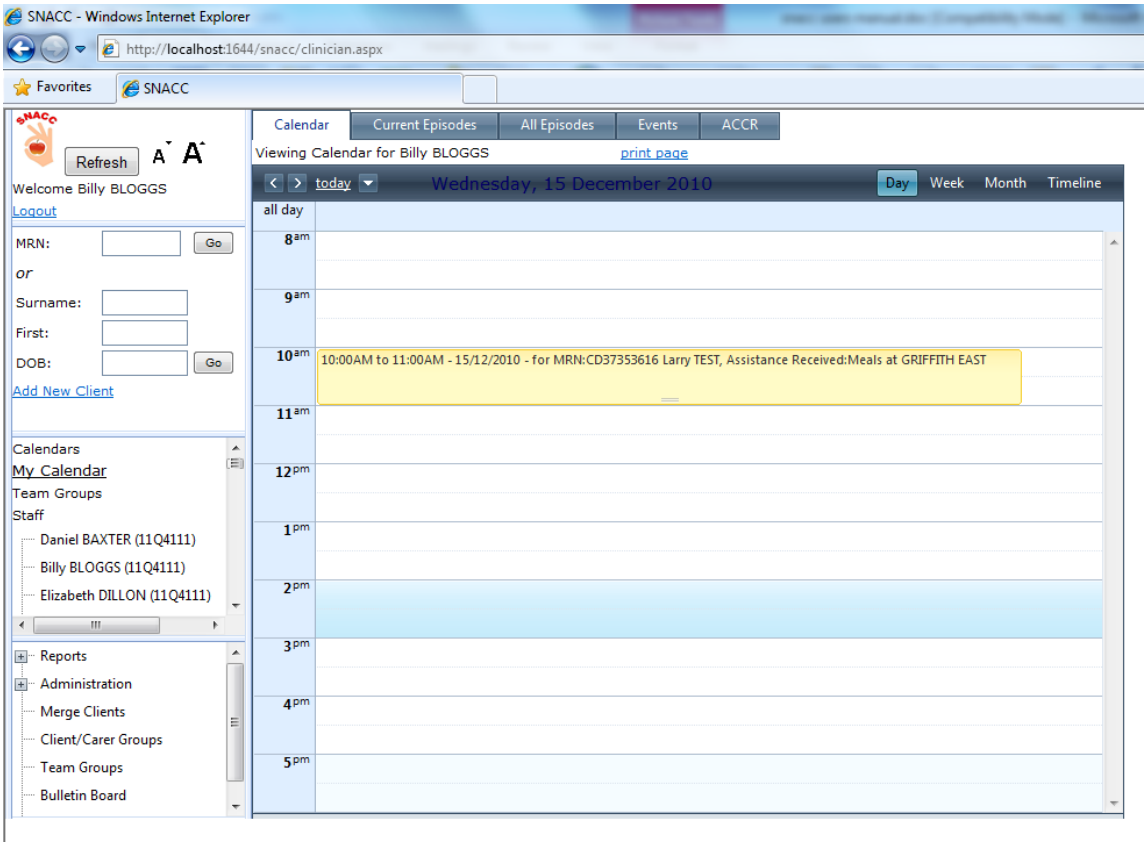


You can click and drag the event to a different time or day of the week. Or by clicking and dragging the bottom of the event can expand or decrease the length of the event

By default, the week calendar shows each day between 8:00am and 5:00pm. Click on the 'show 24 hours' button to show the entire 24 hours of the day in the week calendar

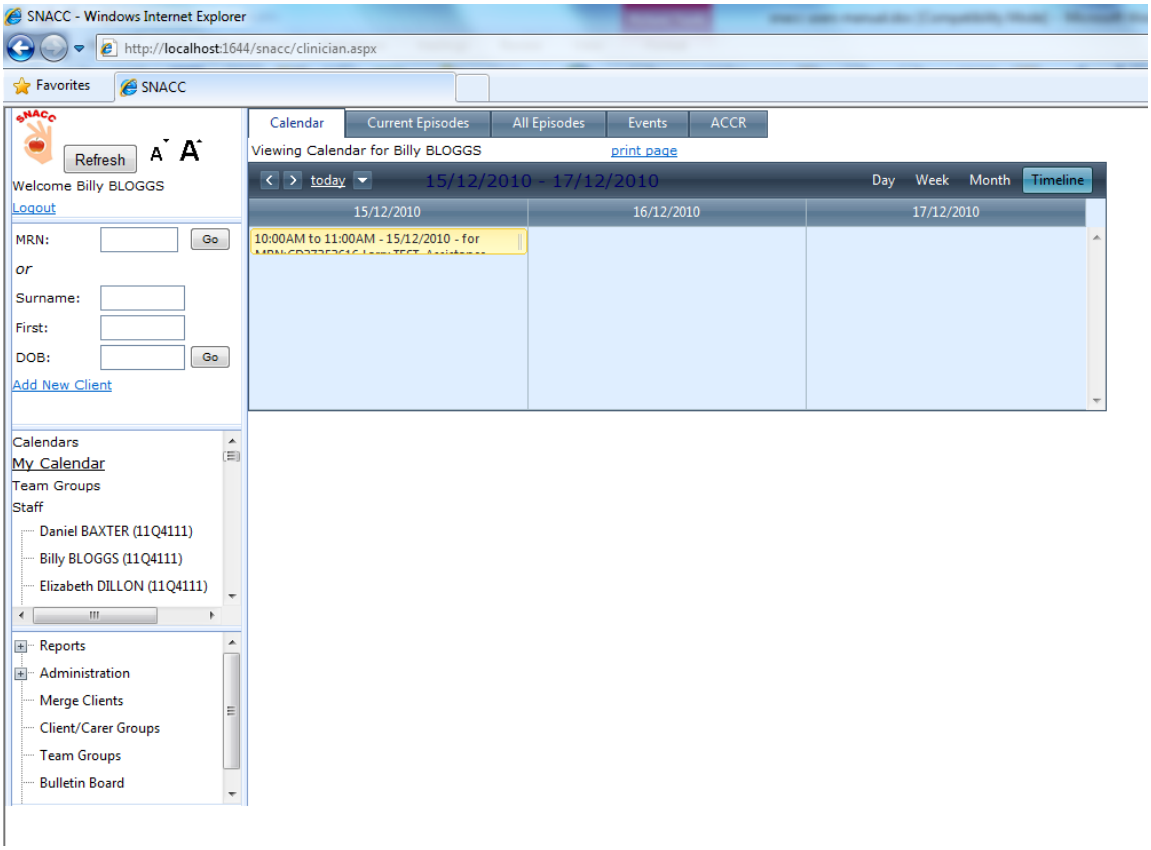
Day Calendar

- By clicking on the 'Day' Calendar, all events for the day will appear. Changing an events length or time is achieved the same way as the week calendar.

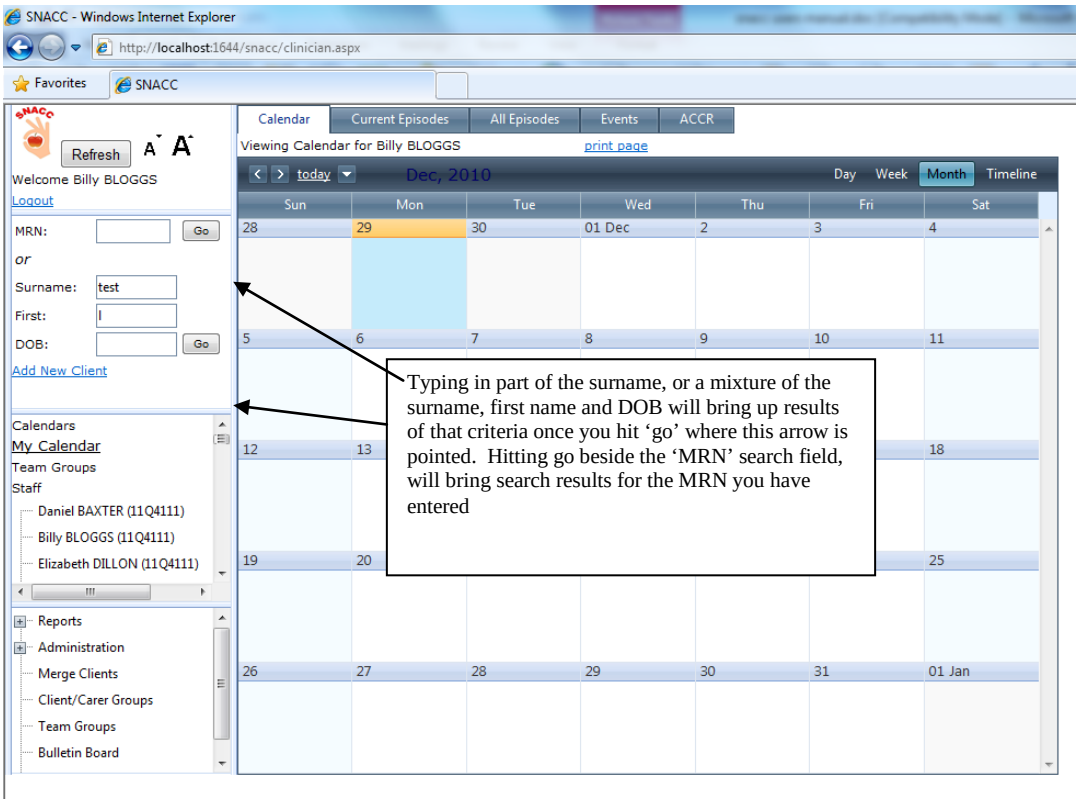


Timeline Calendar

- Shows a timeline of when each event will occur for 3 days. This is helpful to use when group events with a large number of clients are used



Searching for a client

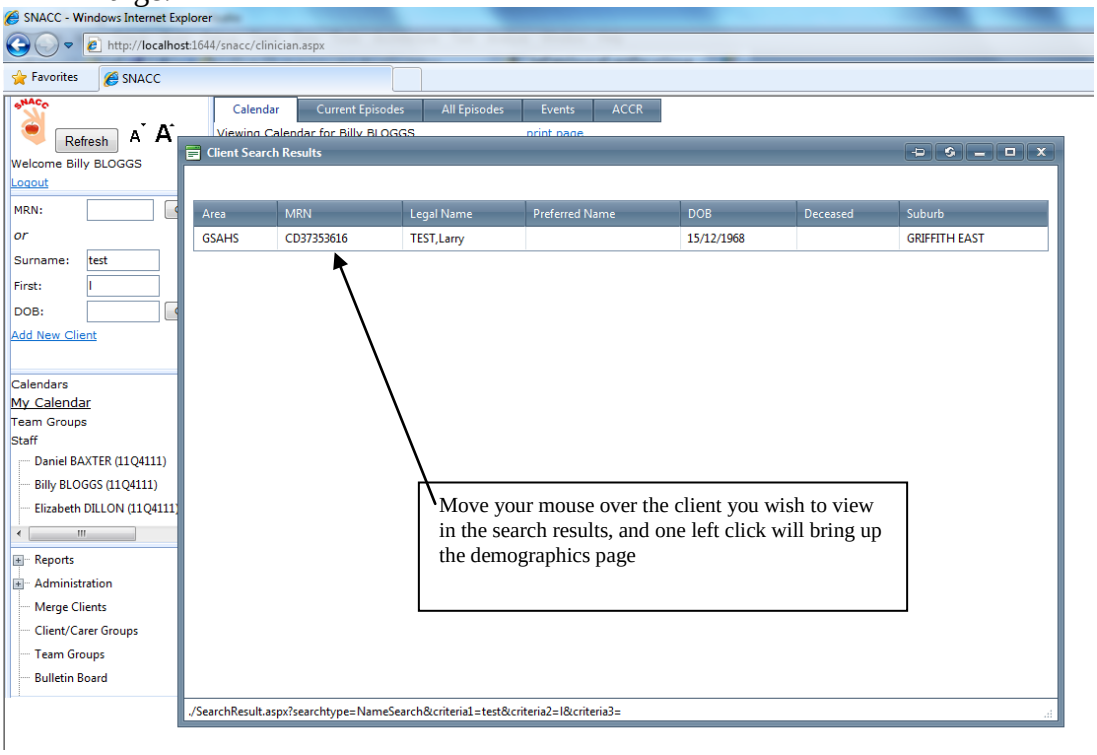


By MRN

- If you choose to search for a client via MRN, a wildcard is placed at the end of your search criteria. For example, if MRN 530 is entered into the search criteria and the 'Go' button is hit, all MRN's that start with 530 will be displayed in the search results

By Name

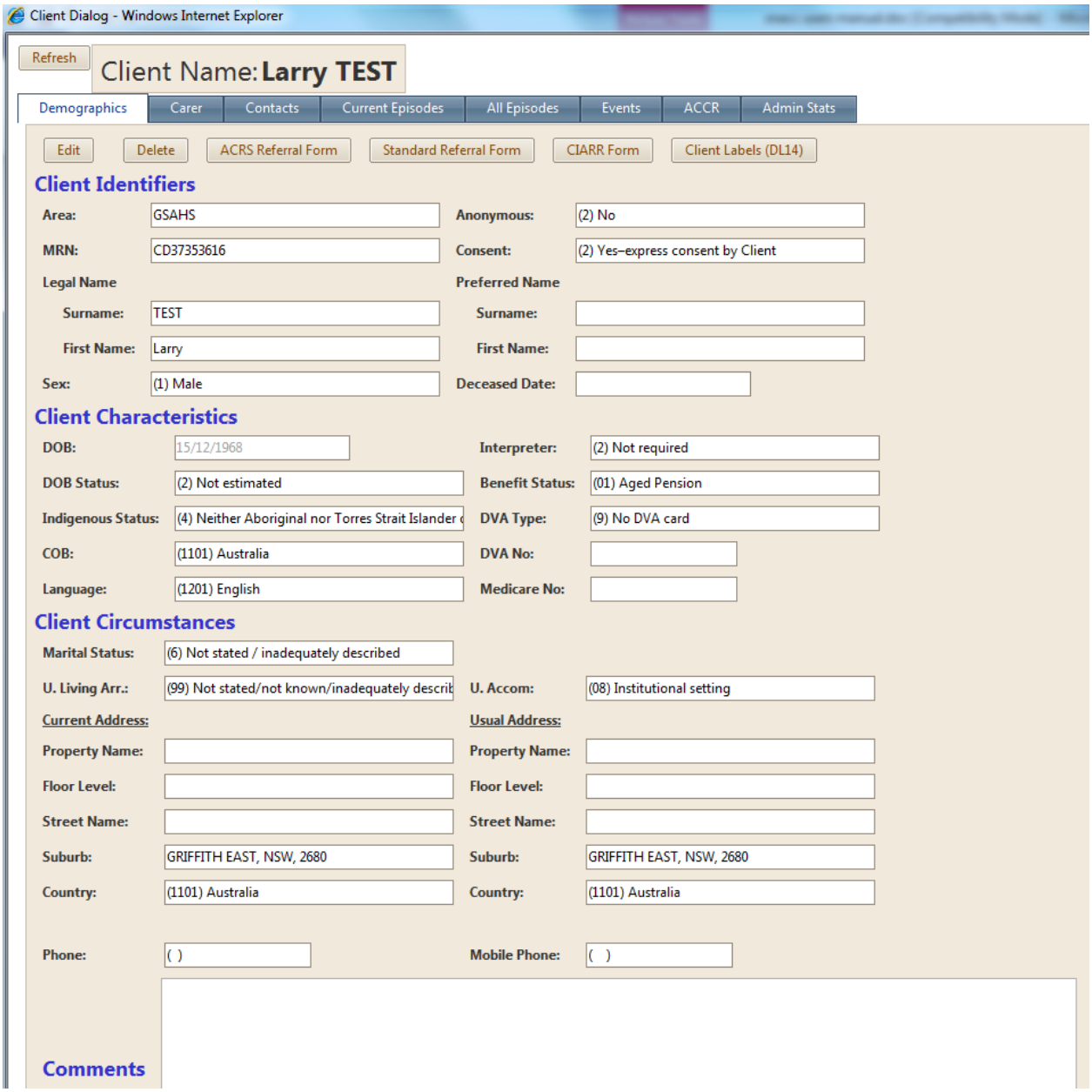
- If you choose to search for a client via Name, a wildcard is placed at the end of your surname and first name search criteria and you can enter either 1, 2 or all of the search fields and both the preferred name and legal name client fields are searched. In the example below, brow is entered in the surname only, so any client that has a surname beginning with 'brow' will appear in the client search results. It is recommended you try and enter in a reasonable amount of information into your name search criteria so that your search results is not too large.



Navigation of Client Screen

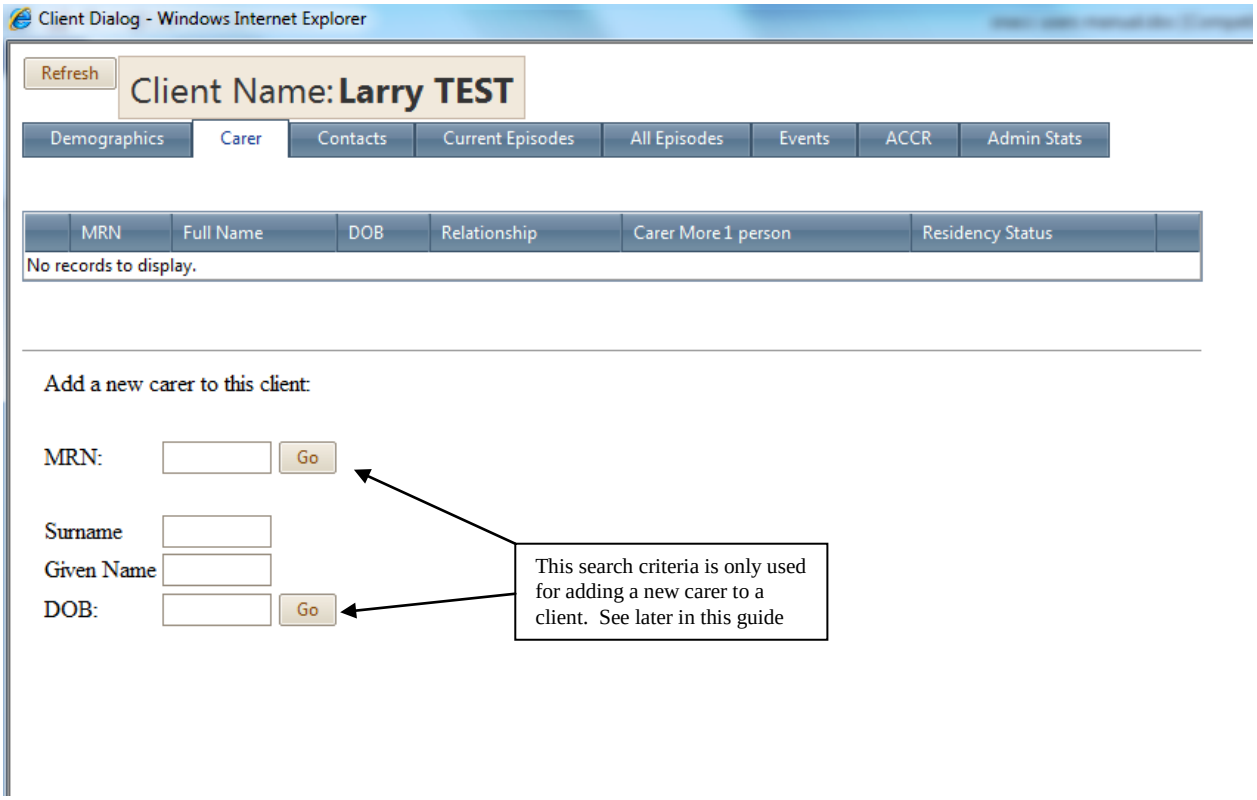
Demographics

- Once the client is selected from the client search results pop-up box, the client's details will appear on a new screen. The Demographics Tab will appear by default and it contains all of that client's identifying details.



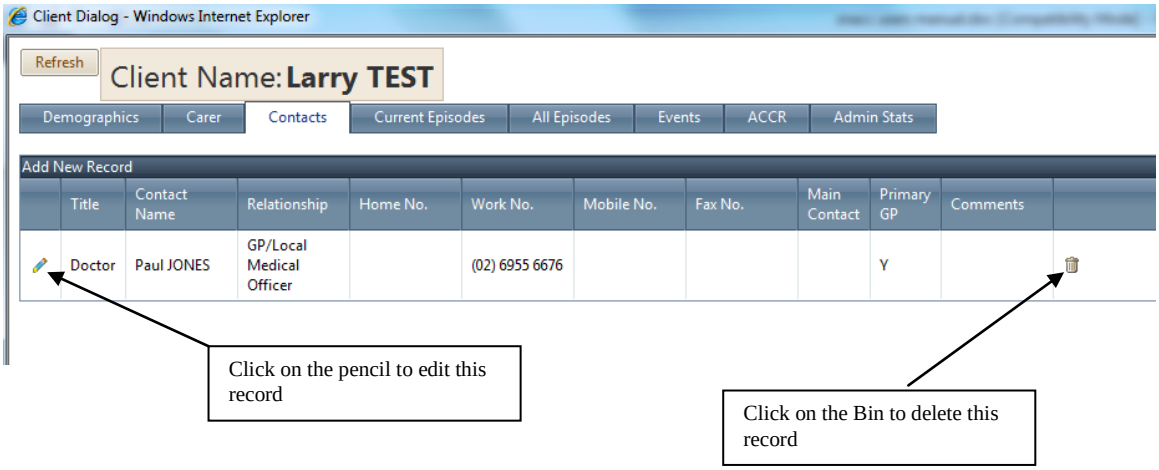
Carer Screen

- The Carer Tab shows all the Carer's for that Client. You add a carer by first searching for that carer in the same way you searched for a client. In fact, it uses the exact same search criteria, in that if the carer does not exist as a client, then you need to add them as a client first. Depending on the Area Health Service you belong to, you don't need necessarily have to assign a Medical Record Number when adding a new carer as a client, just use the autogenerate MRN option. Once again, please check with your AHS if a medical record number should be created instead.



Contacts Screen

- The contacts tab shows all the contacts for the client. Not only carer's or next of kin information can be entered here, but also, GP's, Other Relatives etc. can be entered here and any relevant comments as shown below.

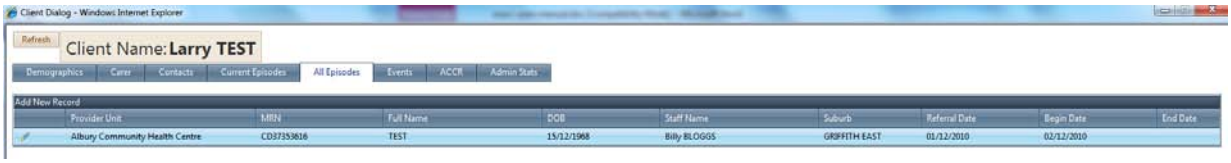


Current Episodes

- Shows all the current episodes for that client. In other words, the Episode End Date must not exist.

All Episodes

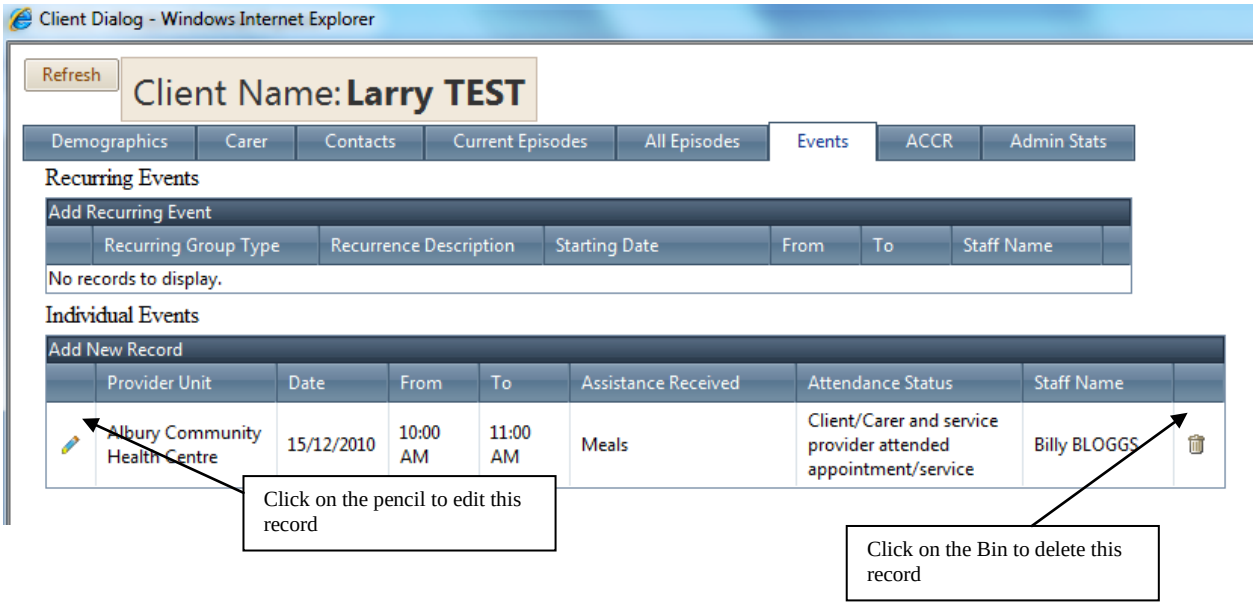
- Shows all the episodes for that client regardless of whether they are opened or closed



Nb: The Current and All Episodes Grids are the only places you can add a new episode

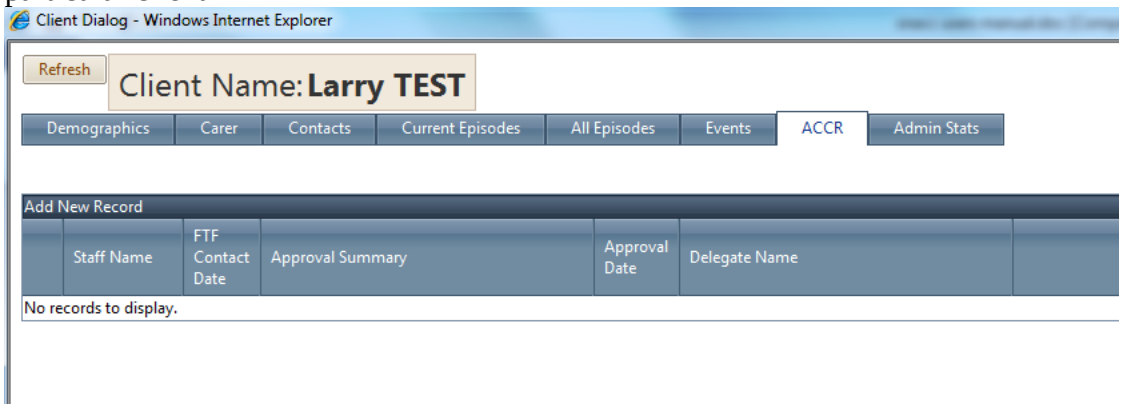
Events Screen

- Similar to the Events screen in clinician, it shows the individual events and recurring events for the client. However, any group events that the client belongs to, exists in the individual events section



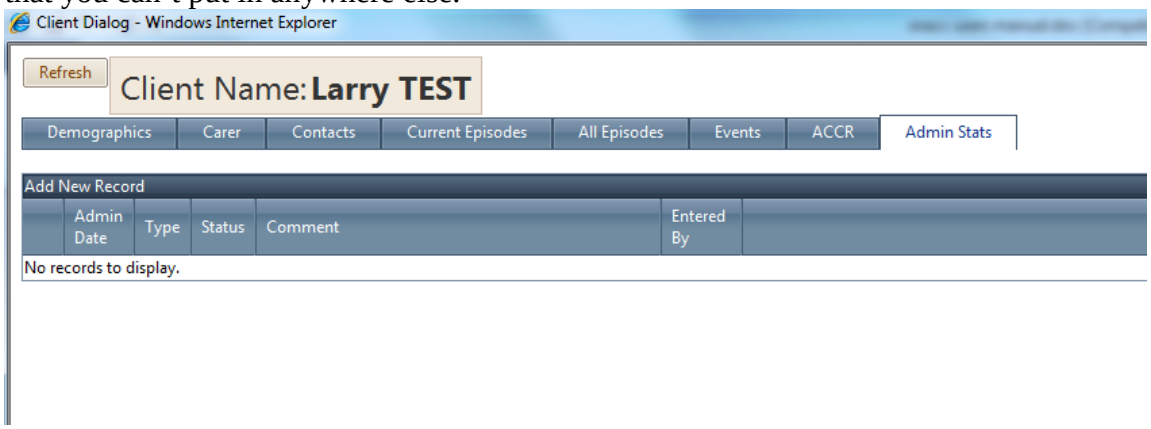
ACCR Screen

- Similar to the ACCR screen in clinician, it shows the ACCR's for that particular client



Admin Stats Screen

This is where you can put in some administration information about the client that you can't put in anywhere else.

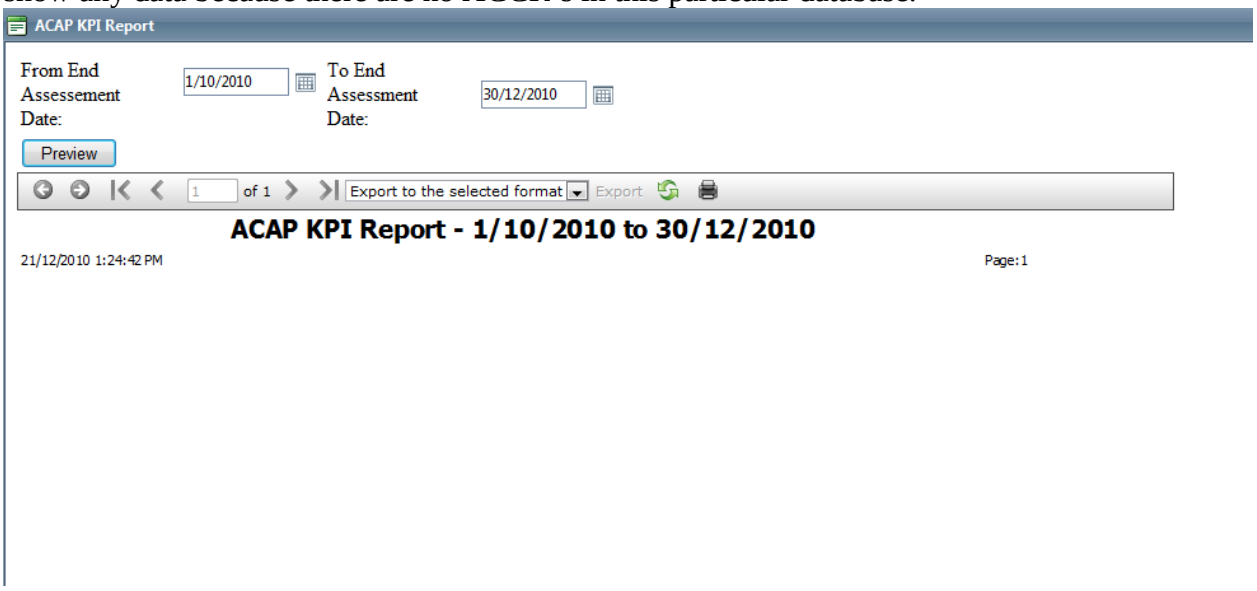


Reports

There are a number of reports you can utilise within SNACC. Each of these reports can be either printed or exported in a variety of other formats such as excel or pdf.

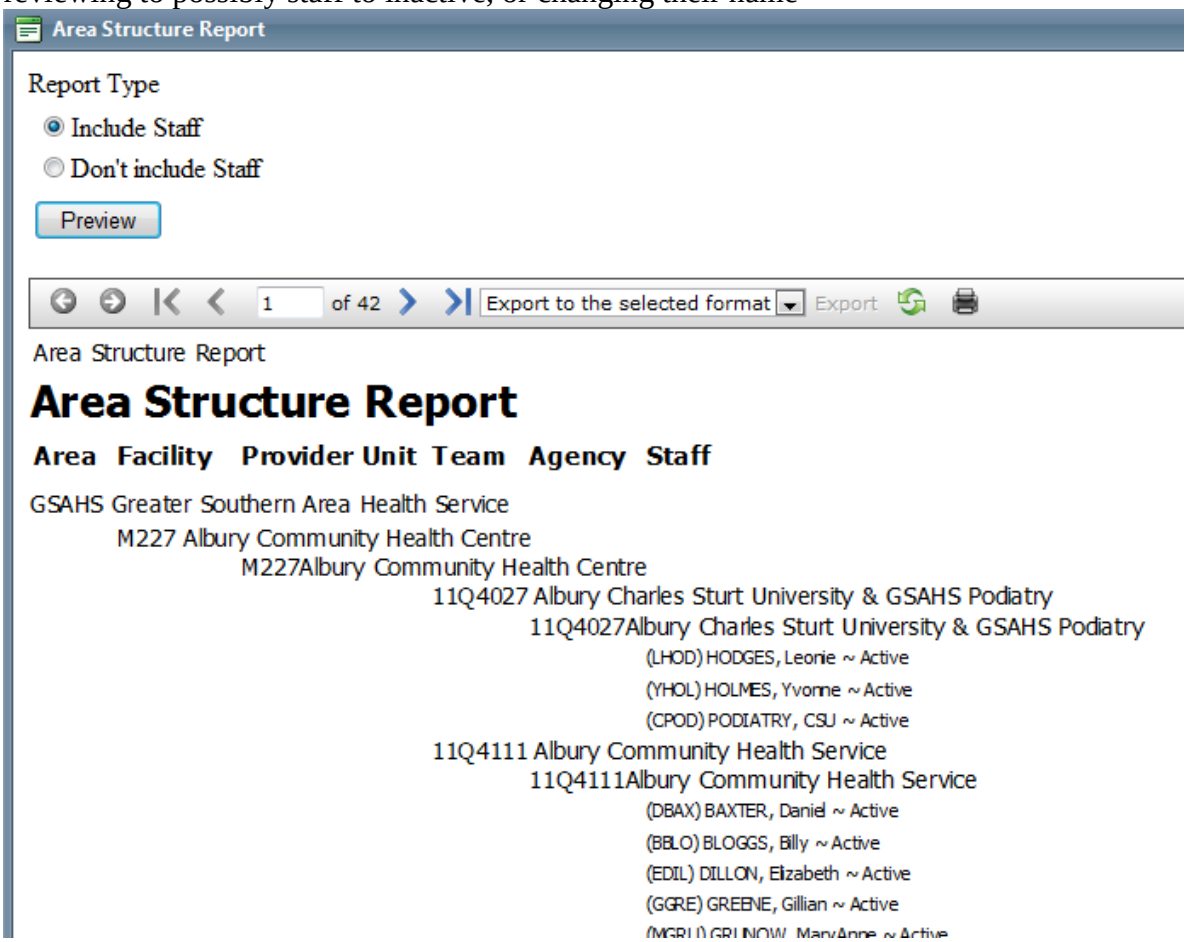
ACAP KPIs Report

This report is used to look at ACCR Counts for all facilities within an area and is based between two assessment end dates. Please note, the example below does not show any data because there are no ACCR's in this particular database.



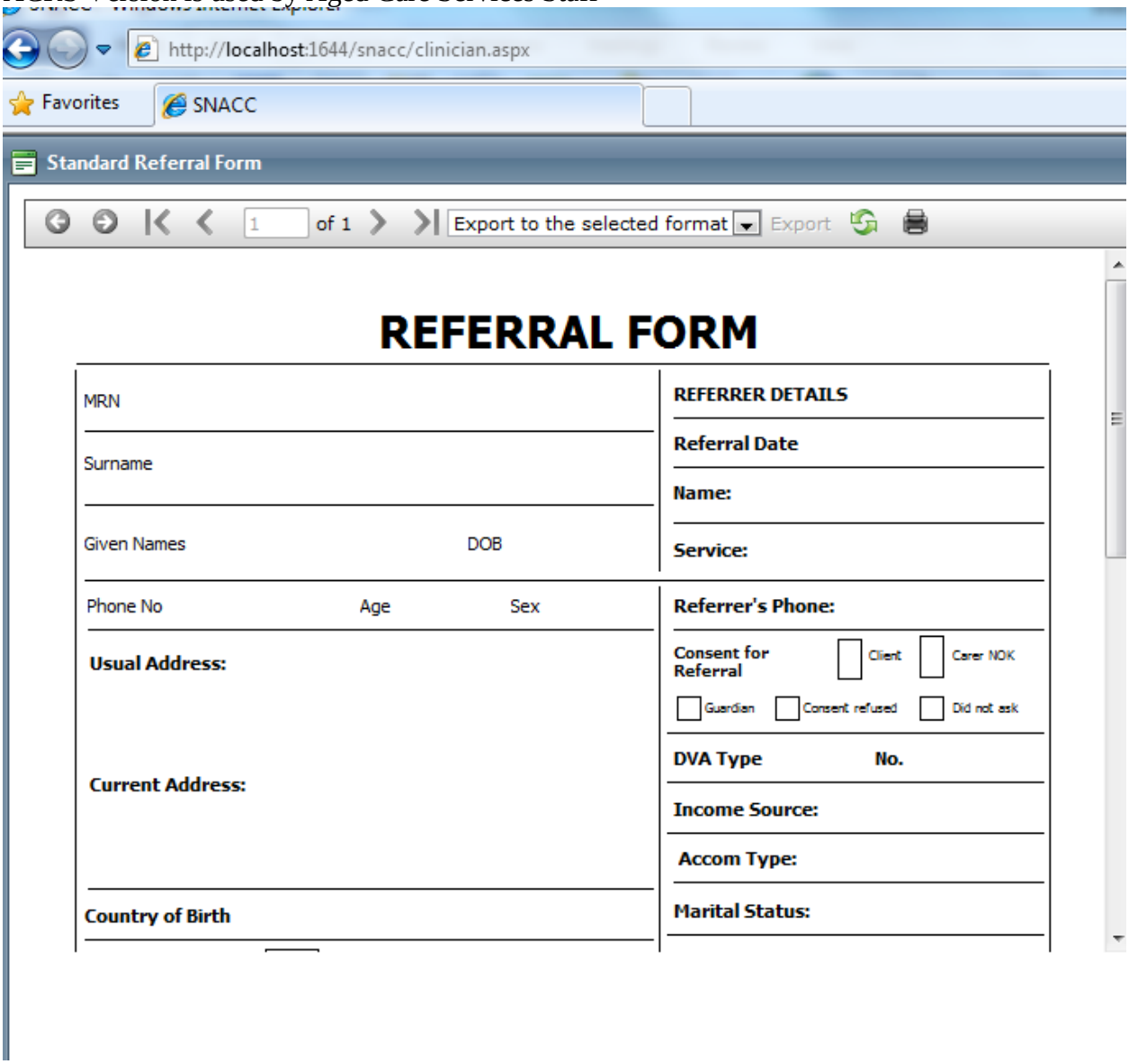
Area Structure Report

This report allows you to see the Facility/provider Unit/Team/Staff breakdown for your Area. This is extremely useful for ensuring your Team Structure and therefore your HACC Agency Codes and Staff Names are in the right places, as well as reviewing to possibly staff to inactive, or changing their name


Area Structure Report
Report Type
Include Staff
Don't include Staff
Preview
1
of 42
Export to the selected format
Export
Area Structure Report
Area Structure Report
Area Facility Provider Unit Team Agency Staff
GSAHS Greater Southern Area Health Service
M227 Albury Community Health Centre
M227Albury Community Health Centre
11Q4027 Albury Charles Sturt University & GSAHS Podiatry
11Q4027Albury Charles Sturt University & GSAHS Podiatry
(LHOD) HODGES, Leonie ~ Active
(YHOL) HOLMES, Yvonne ~ Active
(CPOD) PODIATRY, CSU ~ Active
11Q4111 Albury Community Health Service
11Q4111Albury Community Health Service
(DBAX) BAXTER, Daniel ~ Active
(BBLO) BLOGGS, Billy ~ Active
(EDIL) DILLON, Elizabeth ~ Active
(GGRE) GREENE, Gillian ~ Active

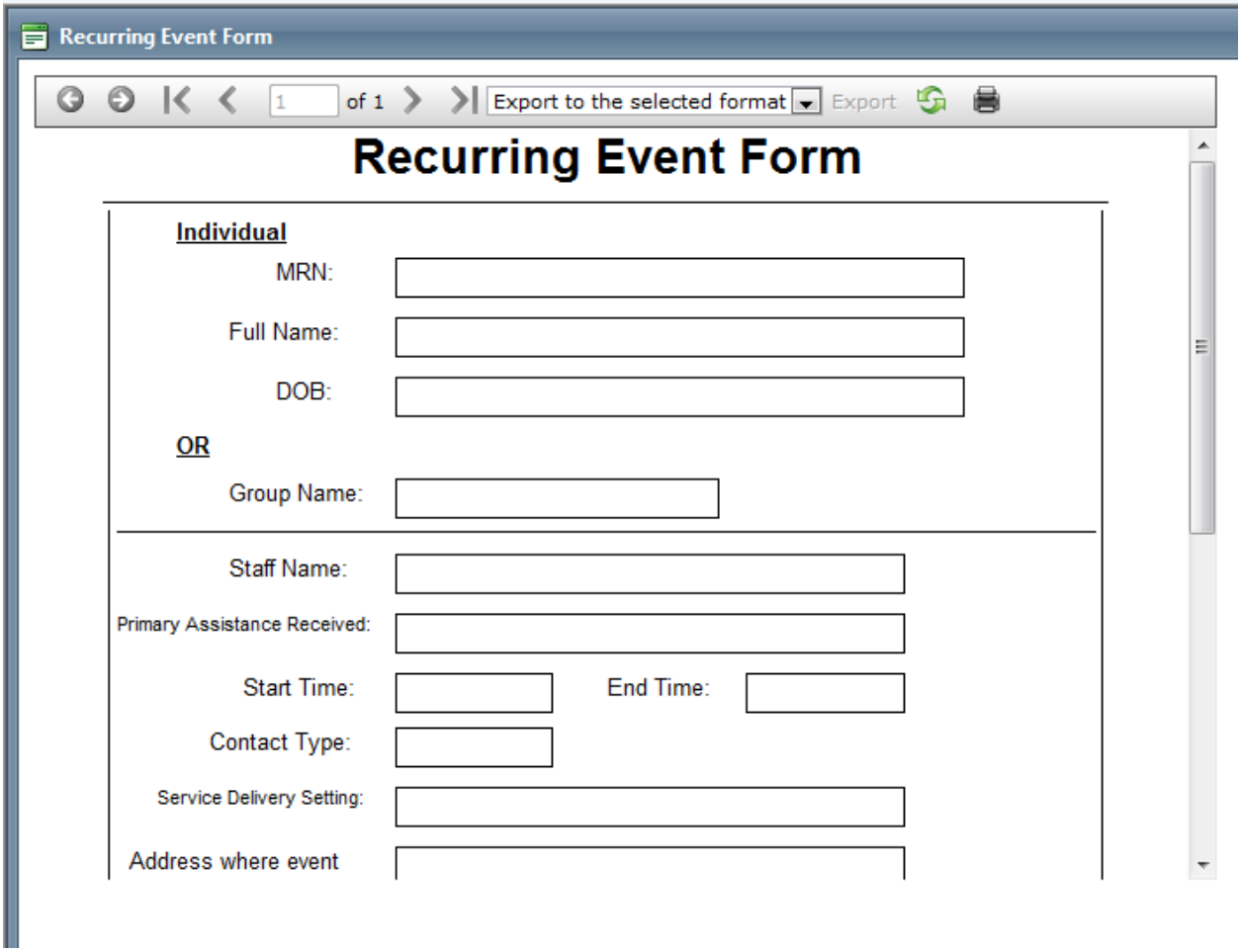
Blank Standard Referral Form and Blank ACRS Referral Form

These forms allow you print off a blank form for filling in referrals in hardcopy. The ACRS Version is used by Aged Care Services Staff



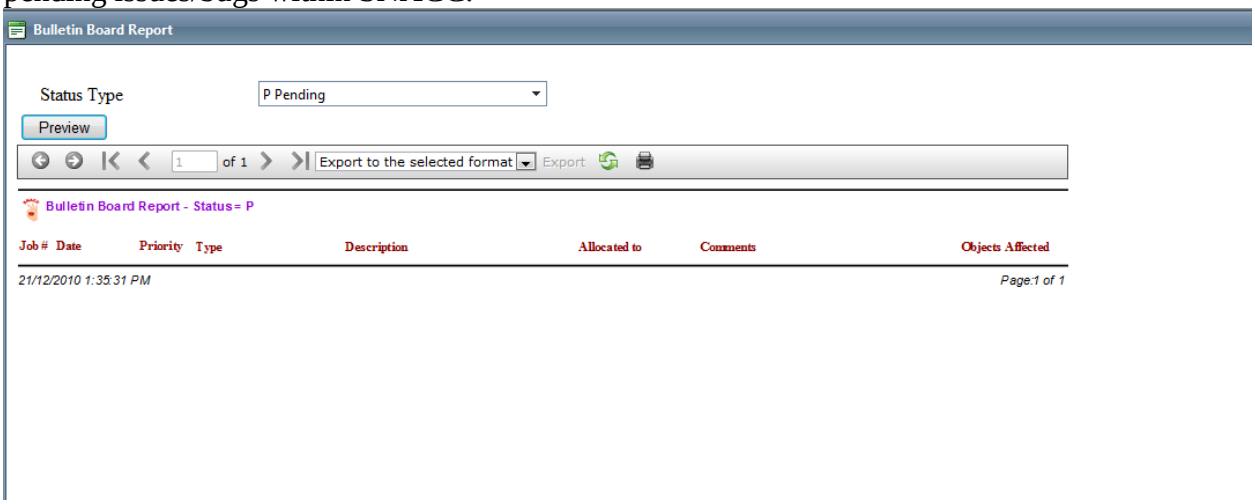
Blank Recurring Event Form

This is similar to the standard referral form, but is a way for staff to enter in a recurring event in hardcopy format, so that it can then be passed onto other staff for entering into SNACC



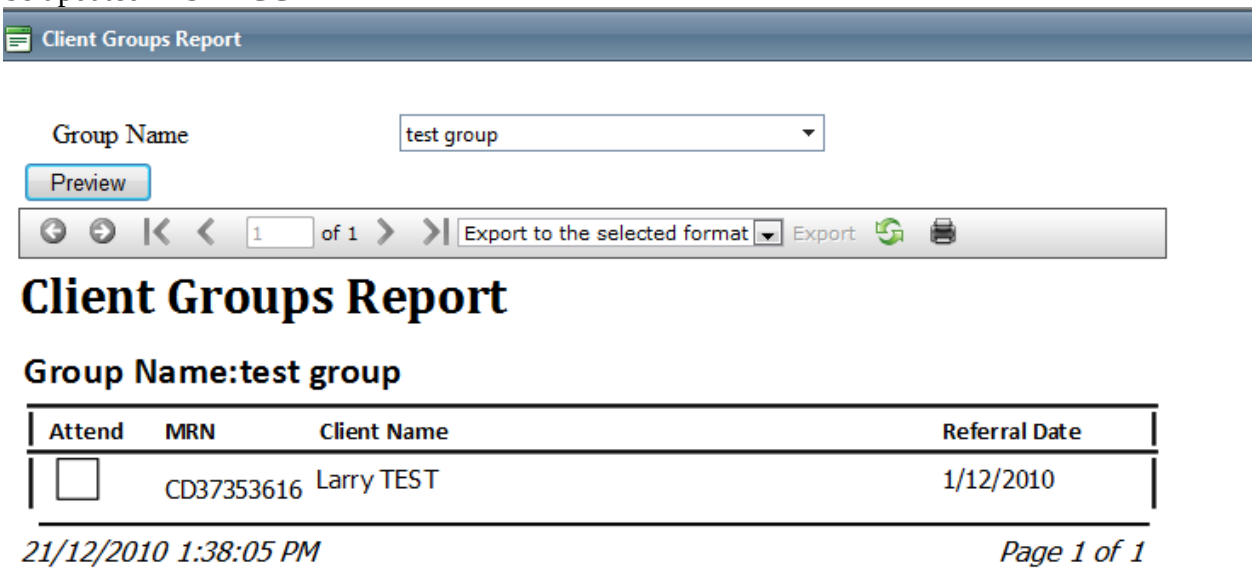
Bulletin Board Report

This report is currently not being used, but was previously used to keep track of pending issues/bugs within SNACC.



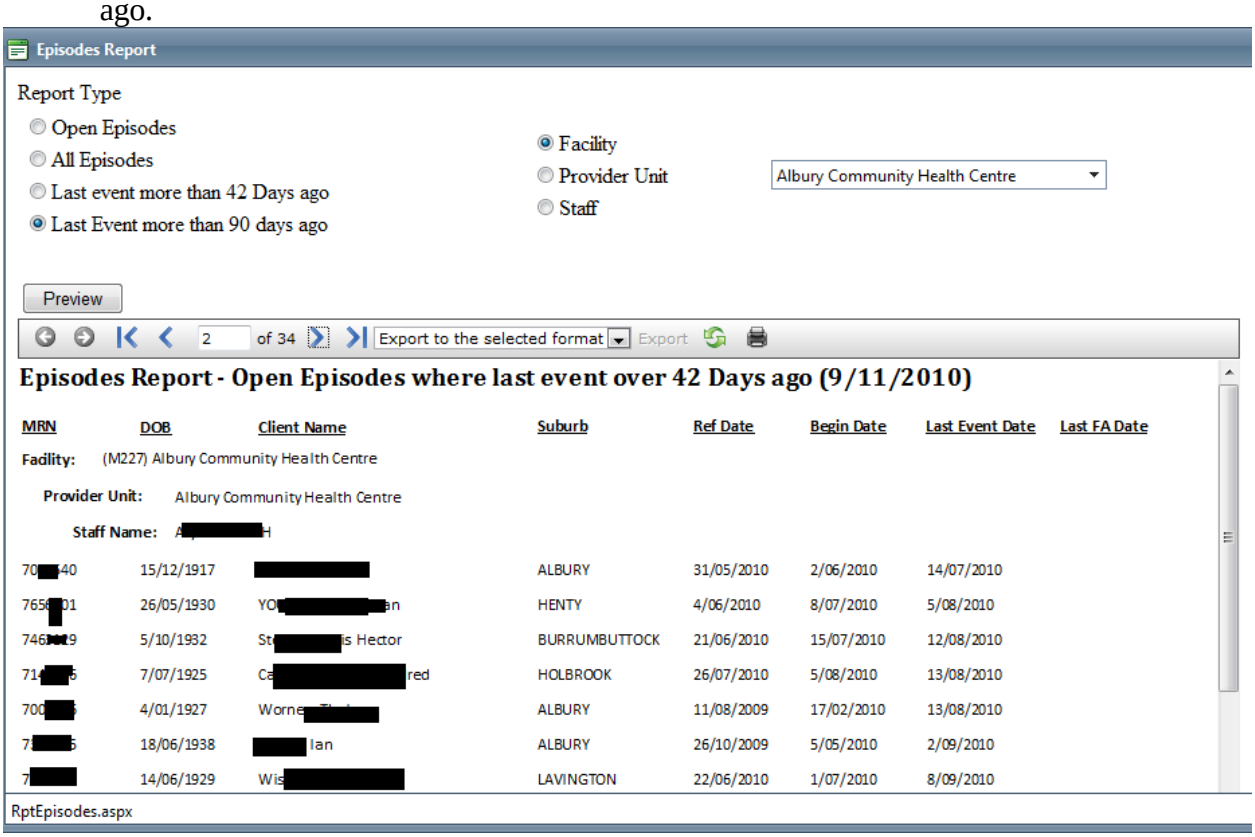
Client Groups Report

This report is used to print off a list of clients belonging to a group, that can then be used as part of a group event or a recurring group event. It is also handy to use as a checklist as to what client's attended a group event, so their attendance can then easily be updated in SNACC



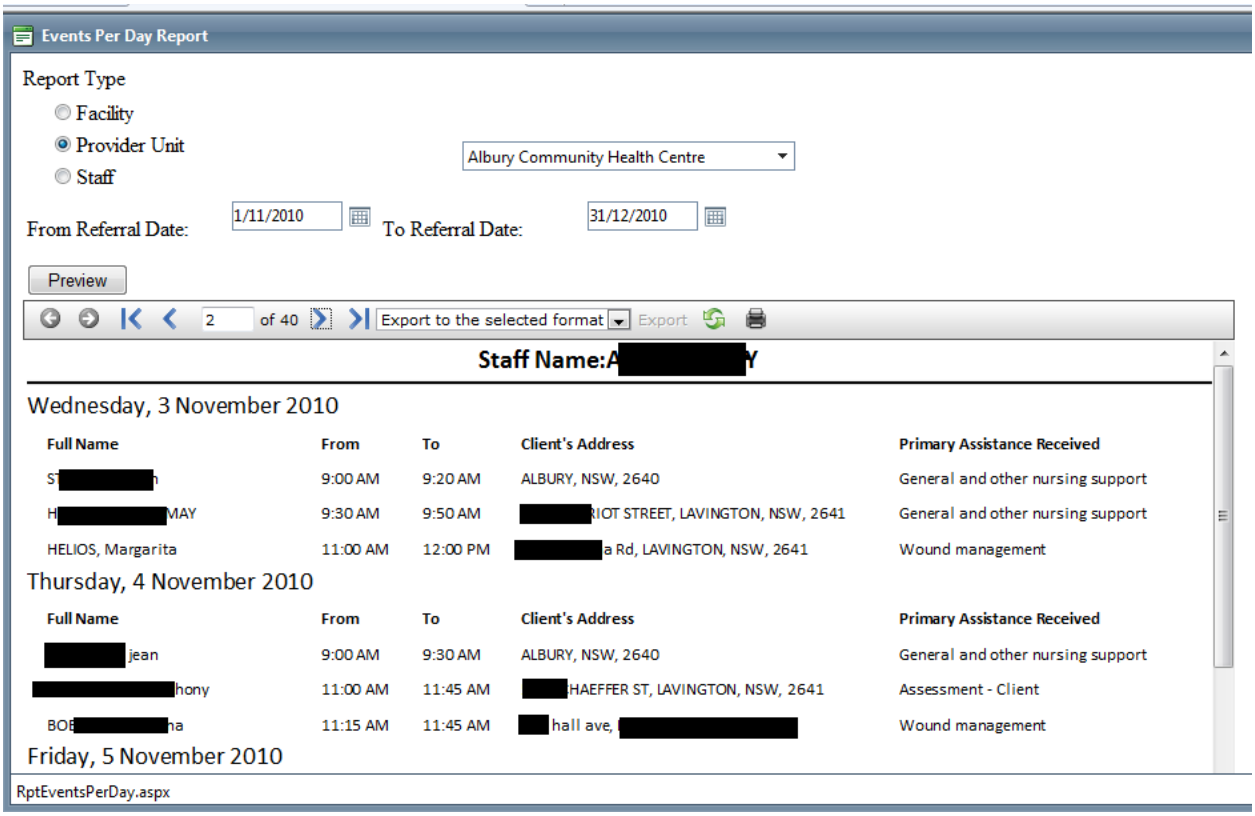
Open Episodes Report

- Choose the the facility, provider unit, or staff. Then choose to either report all episodes, only open episodes, open episodes where the last event was more than 42 days ago, or open episodes where the last event was more than 90 days ago.



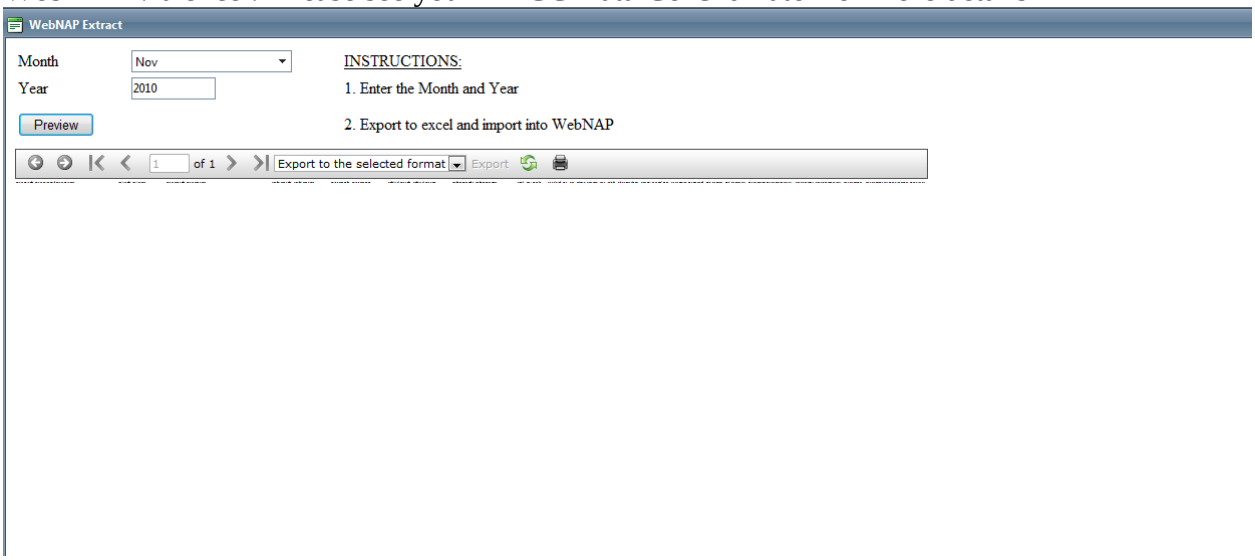
Events Per Day Report

Choose the the facility, provider unit, or staff. Then choose the referral date criteria to show appointment details for Clients between those two periods.



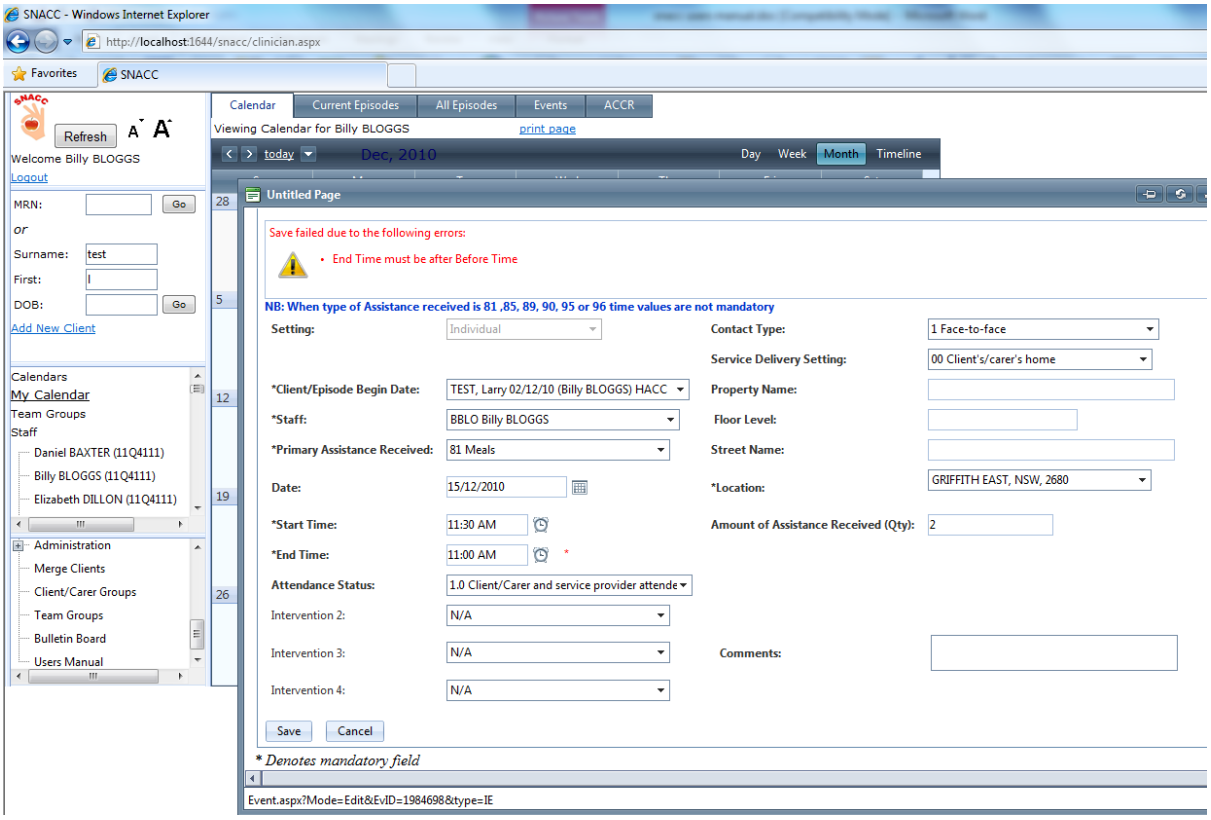
WebNAP Extract

This allows Managers to print off a summary of Event Details for importing into WebNAP via excel. Please see your HACC Data Co-Ordinator for more details

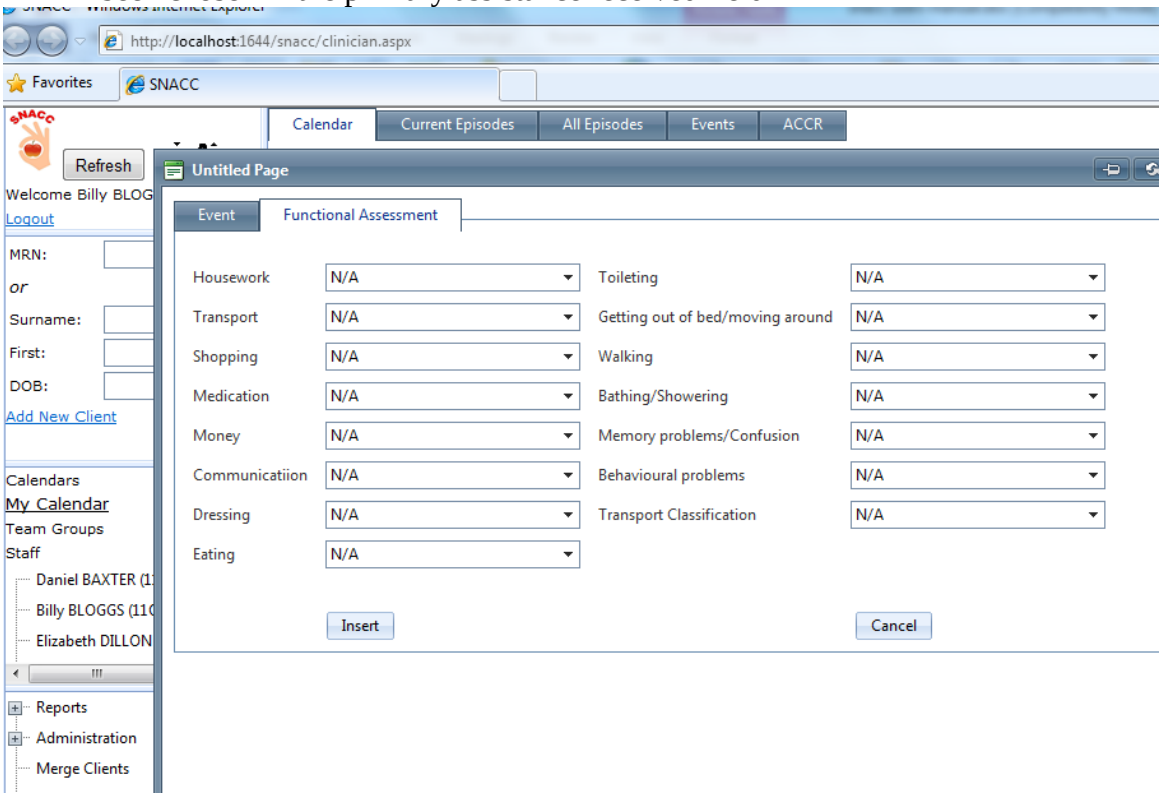


Entering Events

- You can open an event via any of the calendars, or any of the individual events grids. When you save the event, snacc will validate for any errors and bring them up at the top of the screen. You are required to fix these errors before saving successfully.

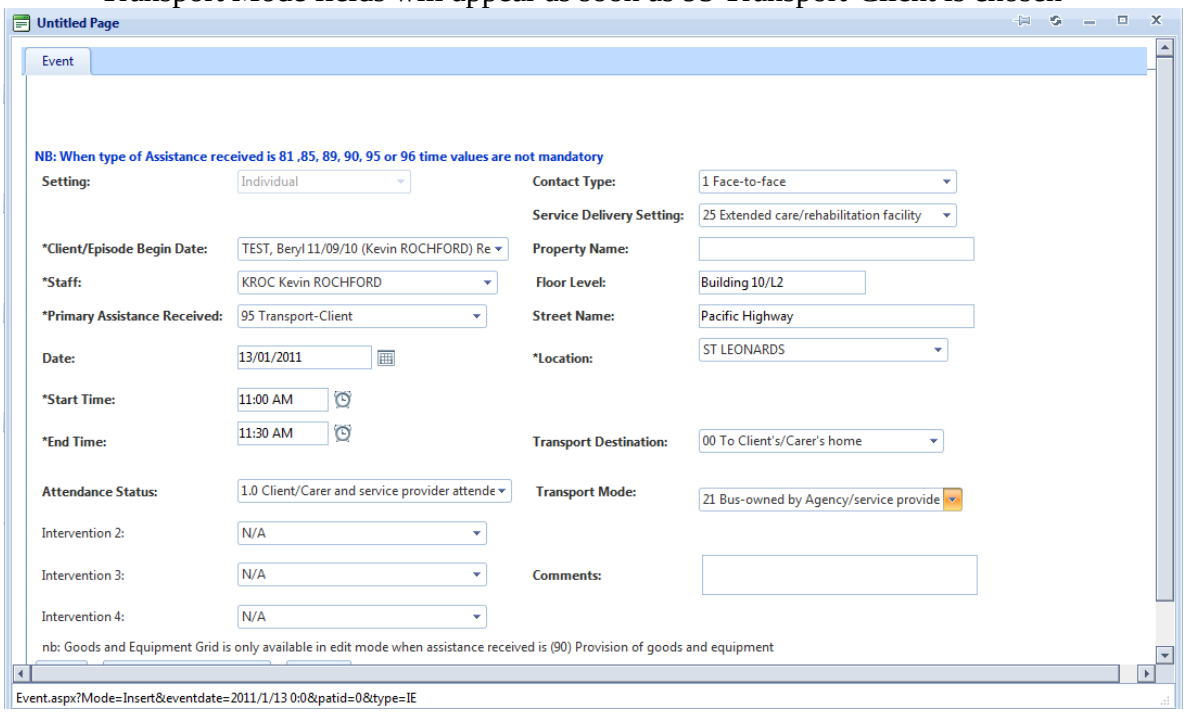


- The functional assessment tab will only appear when '01 assessment..' has been chosen in the primary assistance received field



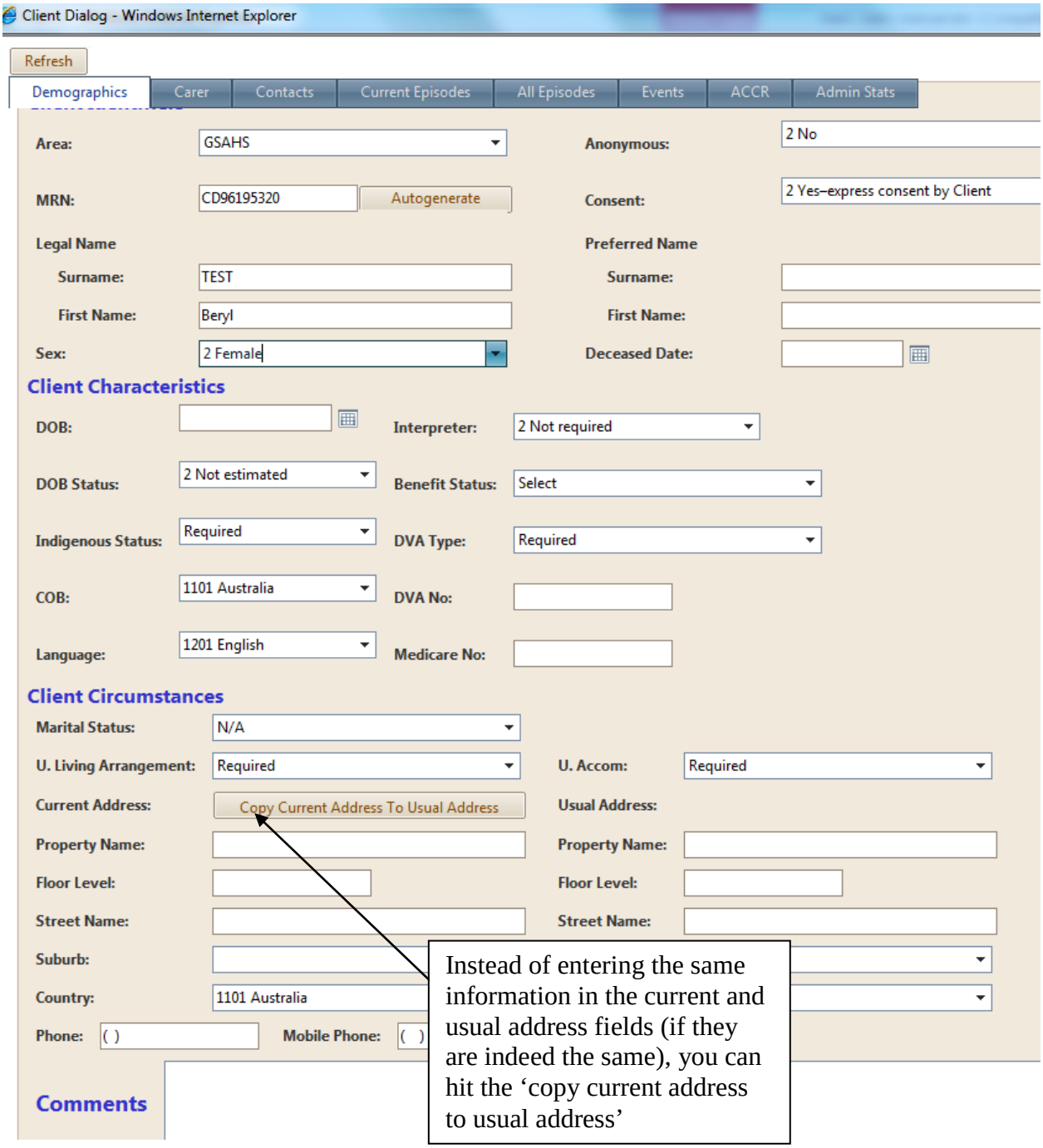
- The Goods and Equipment section will only appear once Primary Assistance Received is '35 provision of Goods and Equipment' and you are in edit mode. See Goods and Equipment Section for more information

- As shown below, choosing a different primary assistance received will hide/display certain fields. In this example the Transport Destination and Transport Mode fields will appear as soon as 95 Transport-Client is chosen


Untitled Page
Event
NB: When type of Assistance received is 81 ,85, 89, 90, 95 or 96 time values are not mandatory
Setting: Individual
Contact Type: 1 Face-to-face
Service Delivery Setting: 25 Extended care/rehabilitation facility
*Client/Episode Begin Date: TEST, Beryl 11/09/10 (Kevin ROCHFORD) Re
Property Name:
*Staff: KROC Kevin ROCHFORD
Floor Level: Building 10/L2
*Primary Assistance Received: 95 Transport-Client
Street Name: Pacific Highway
Date: 13/01/2011
*Location: ST LEONARDS
*Start Time: 11:00 AM
*End Time: 11:30 AM
Transport Destination: 00 To Client's/Carer's home
Attendance Status: 1.0 Client/Carer and service provider attende
Transport Mode: 21 Bus-owned by Agency/service provide
Intervention 2: N/A
Intervention 3: N/A
Comments:
Intervention 4: N/A
nb: Goods and Equipment Grid is only available in edit mode when assistance received is (90) Provision of goods and equipment
Event.aspx?Mode=Insert&eventdate=2011/1/13 0:0&patid=0&type=IE

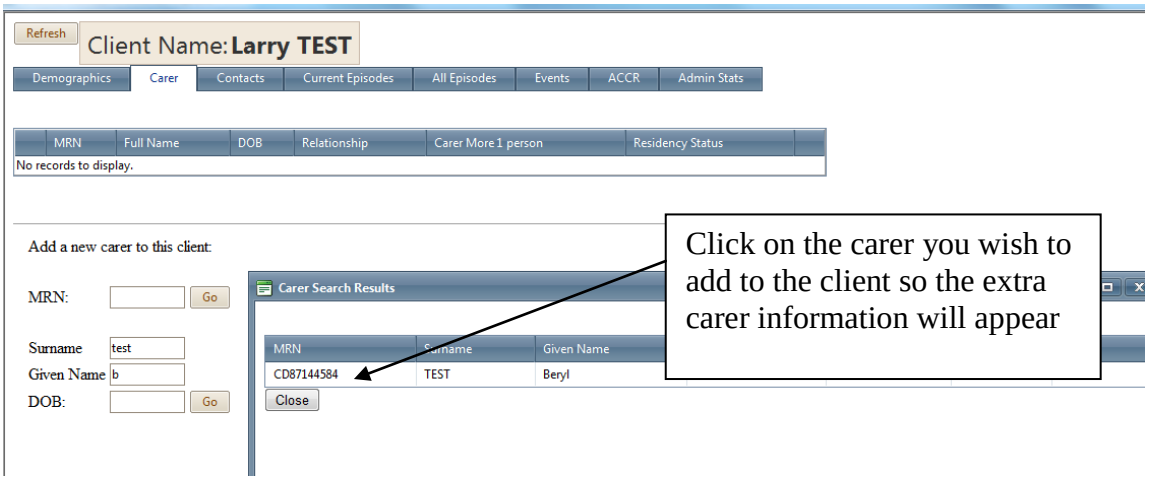
Adding/Editing a Client

- From the clinician/main screen, choose 'add new client' which is situated at the bottom of the search frame
- Editing a client is performed by clicking the edit button once you've chosen a client to view.
- Please use the patient identifier in your PAS System (IPM/EMR etc.) as the mrn. However, under circumstances where you cannot retrieve a patient identifier, you can enter in a temporary MRN as pointed out below. In time, the autogenerate mrn button will allocate a temporary mrn for you.

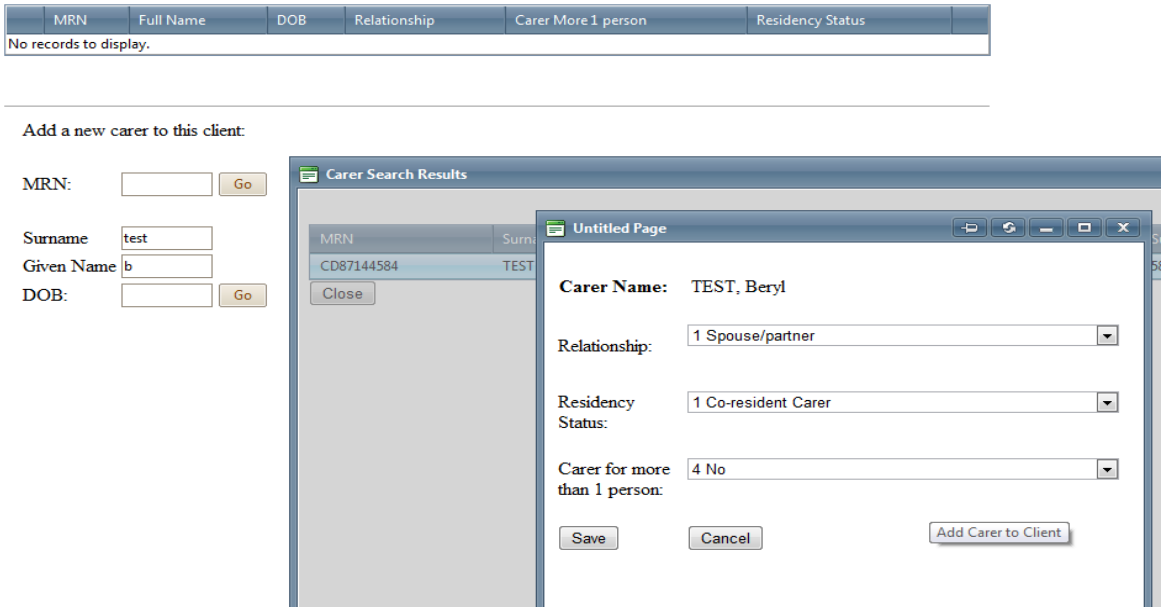


Adding a new carer

- Adding a new carer to a client is firstly done in the same way as searching a client as shown below.



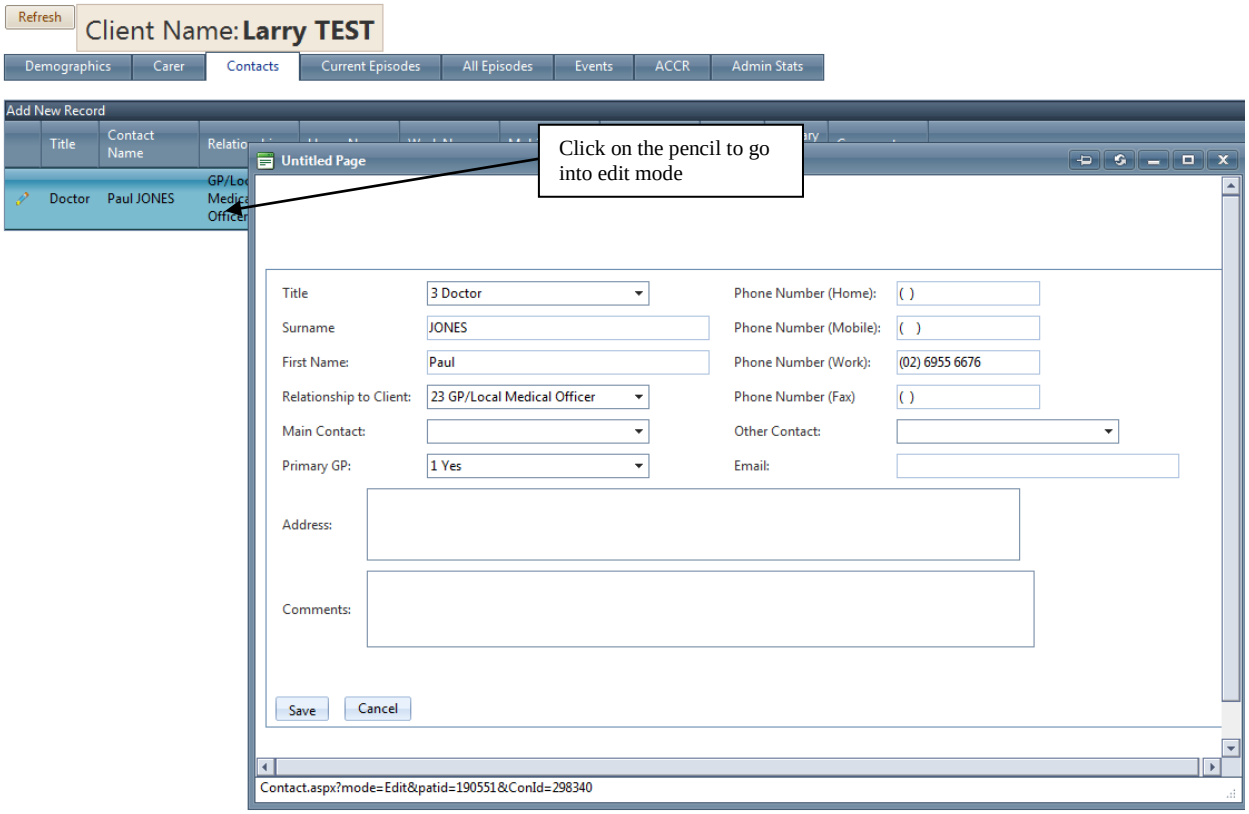
- When you hit 'go', the carer search results will appear. Choose the carer you wish to include and another pop-up box will appear as shown below. Hit the save button when the 3 mandatory fields are entered and that carer will be added to the client and you will be taken back to the search results box again in case you wanted to add another carer.



Nb: For a carer to appear in the search results, they must first be added as a client (if they don't already exist)

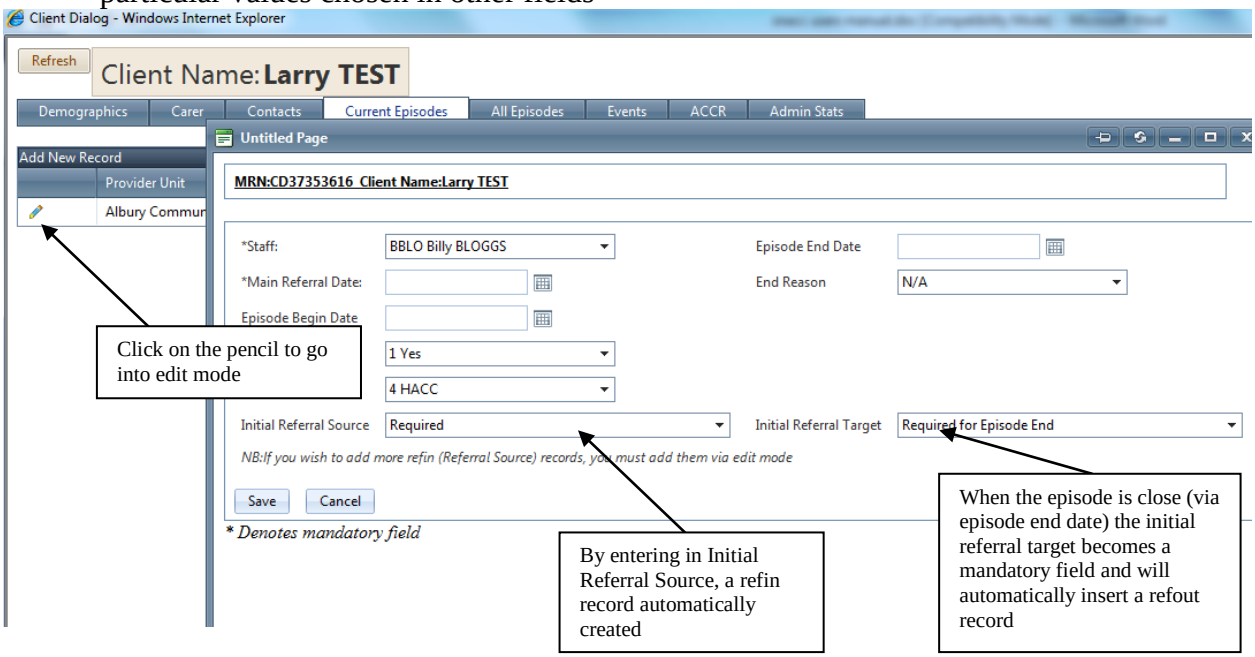
Adding/Editing a contact

- Click on either 'Add New record' or the edit record button (the pencil icon) and you will see a screen similar to the one below where you can add or modify any contacts



Adding/Editing an Episode

- Click on either 'Add New record' or the edit record button (the pencil icon) and you will see a screen similar to the one below where you can add or modify an episode.
- Like the event screen, a number of fields either hide or display depending on particular values chosen in other fields

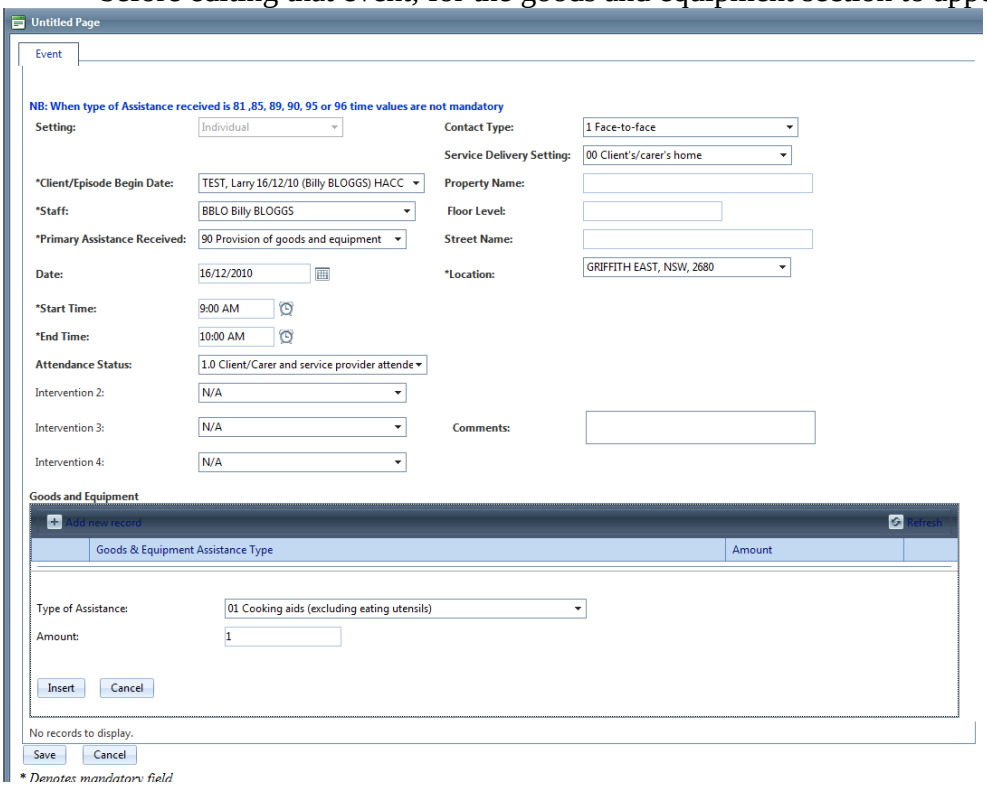


Nb: Some fields may default to values automatically if you have defaults set in your staff, provider unit or facility screens

- When you go into edit episode mode, the refin and refout boxes appear, so you can either modify the initial refin/refout records or create extra ones

Adding/Editing Goods and Equipment

- The goods and equipment grid will only appear in the events menu if Primary Assistance Received is 90 – Provision of good and equipment and you are in edit mode. In other words, you must have already entered the new event before editing that event, for the goods and equipment section to appear.

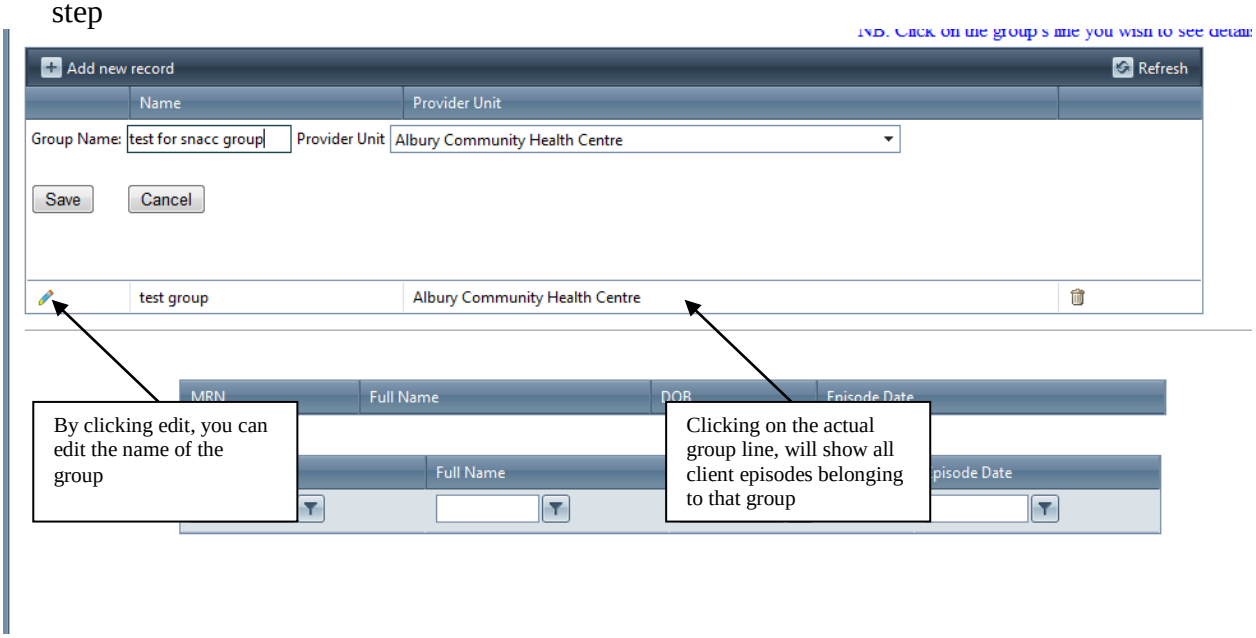


Adding/Editing a Client/Carer Group

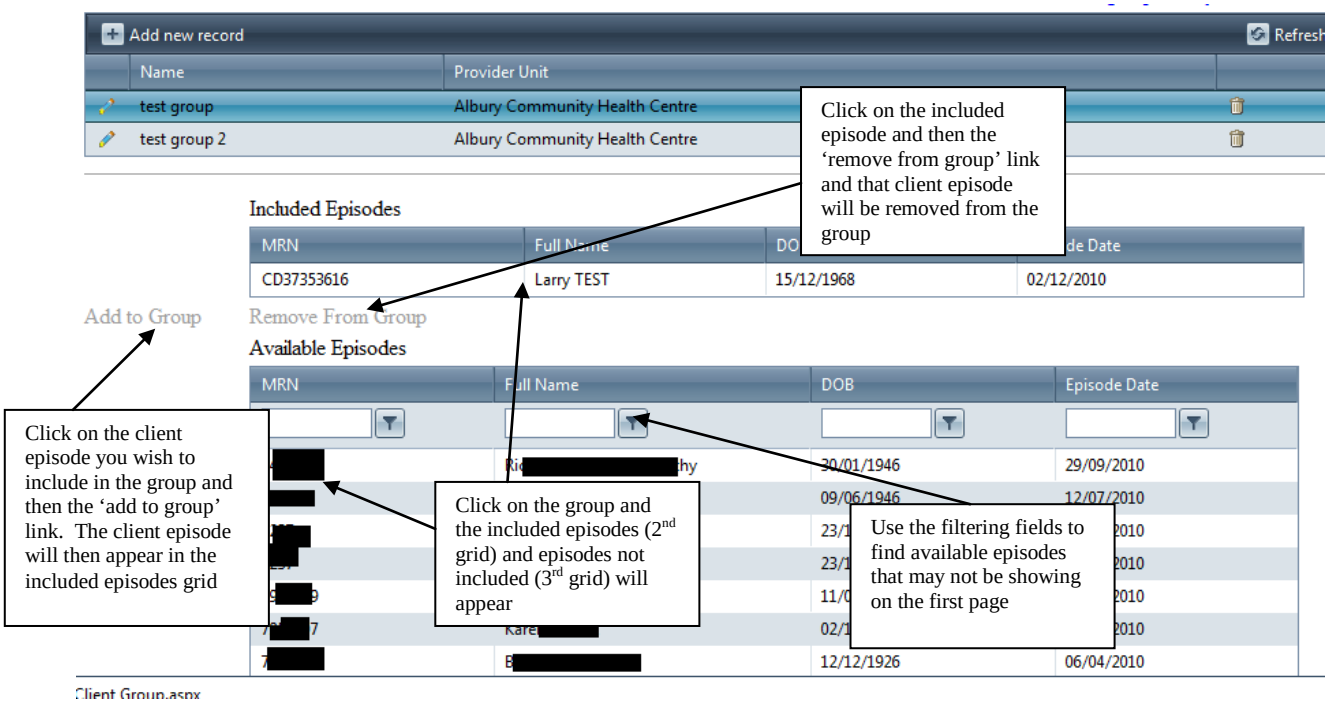
- A client/carer group contains a number of client's episodes that have been previously selected. This group can then be used in the group events grid to create a single group made up of those multiple client episodes. This means that for a group attendance such as a day centre, you don't need to enter every event for every client that attended…just the group containing those client's episodes. You will however, still need to modify the individual events via the calendar for certain client's in that group that may not have attended on that particular event.

- By clicking on the client/carer groups link you will be shown all the available groups you have authority to.

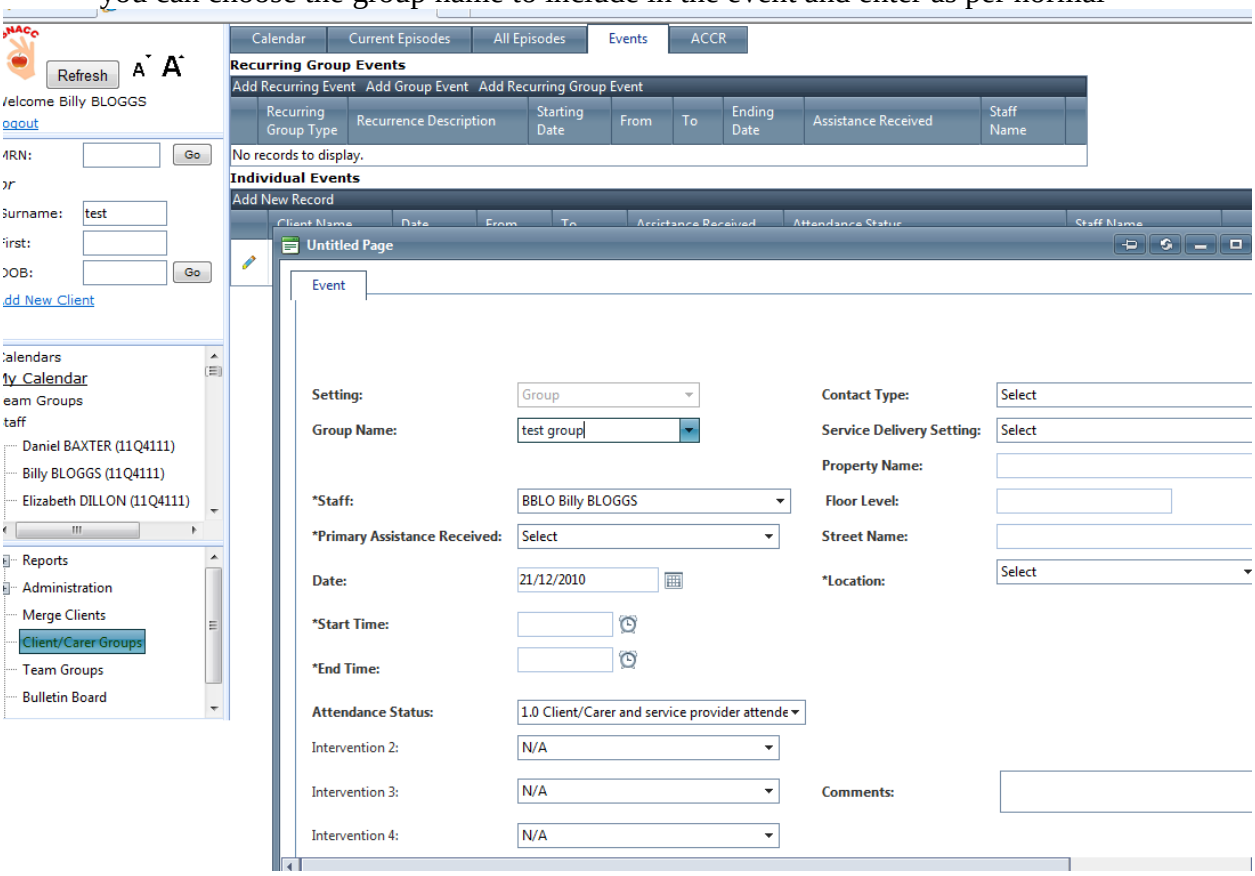
- By clicking on 'Add new record' you can create a new group. Please note, this will only create the group, with no clients attached. That's for the next step



- By clicking on a particular group, you can view the client episodes belonging to that group as shown below.

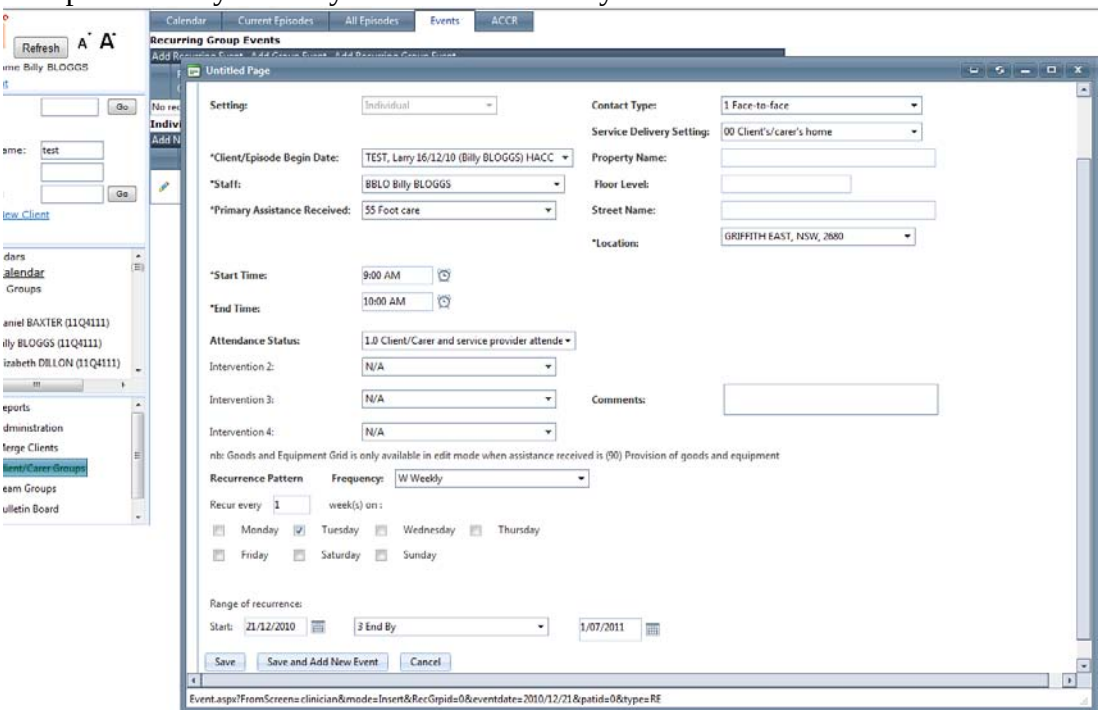

Add new record
Refresh
Name
Provider Unit
test group
Albury Community Health Centre
test group 2
Albury Community Health Centre
Click on the included episode and then the 'remove from group' link and that client episode will be removed from the group
Included Episodes
MRN
Full Name
DO
de Date
CD37353616
Larry TEST
15/12/1968
02/12/2010
Add to Group
Remove From Group
Available Episodes
MRN
Full Name
DOB
Episode Date
30/01/1946
29/09/2010
09/06/1946
12/07/2010
12/12/1926
06/04/2010
Click on the client episode you wish to include in the group and then the 'add to group' link. The client episode will then appear in the included episodes grid
Click on the group and the included episodes (2nd grid) and episodes not included (3rd grid) will appear
Use the filtering fields to find available episodes that may not be showing on the first page
Client Group.aspx

- When clicking 'add Group Event' in the 'events group' grid on the events tab, you can choose the group name to include in the event and enter as per normal



Adding/Editing a recurring event

- A recurring event allows you to enter an individual event on a predetermined pattern of times. This is extremely useful for clients that receiving regular, ongoing events.
- Click on 'add new record' in the recurring events grid of the clinician or client screens and enter in the event details the same way you would for an individual event, except there is no event date but a section called recurrence pattern at the bottom of the screen which is used to set how often you wish the event to occur.
- The screen below shows some of the available options when a client's event is created weekly. In this case, a new event will be created for the client's episode every Tuesday until the first of July 2011

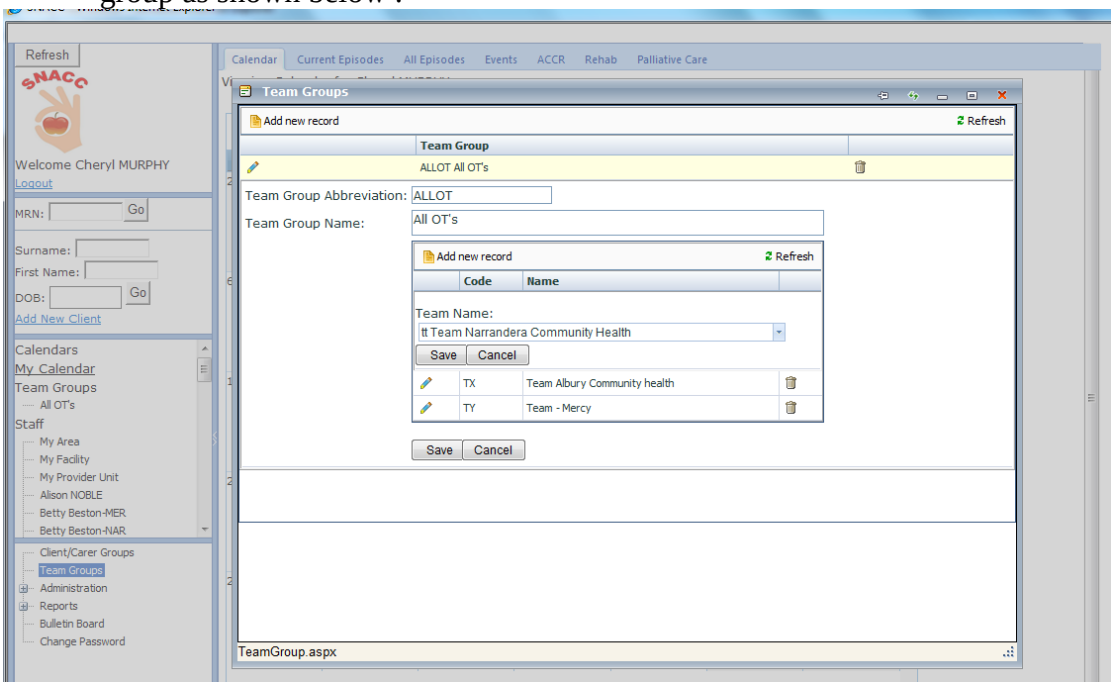


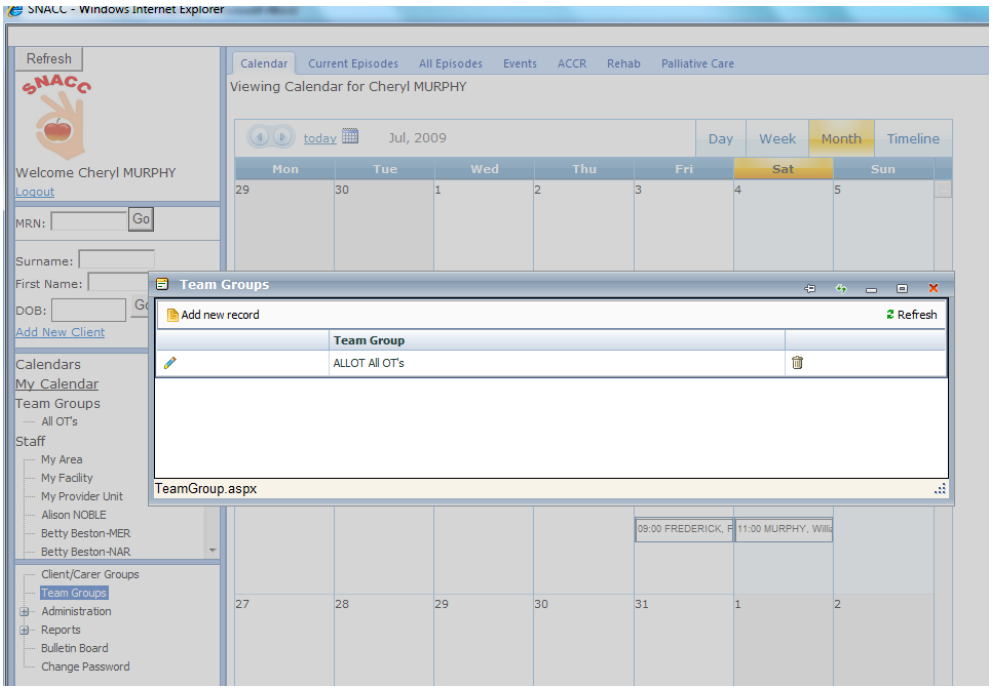
NOTES:

- *If a recurring event is modified or deleted, then only those events that are due to appear on or after the current date will be affected. Any events that were part of the recurring events prior to the current date will not be affected. This is to prevent events that have occurred and had extra data put in (eg: attendance status) from being overwritten, or possibly deleted if the recurring pattern changed.*

Adding/Editing a Team Group

- A Team Group is quite simply a bunch of teams that are given a name, which then shows up on the calendar, and so then allows for multiple teams to be shown on the same clinician screen. For example, you may wish to include all your area's OT's in the team group. That means, when the All OT's link is clicked in the calendar frame, all events, episodes, etc. will be shown on the one clinician screen. This is where the calendar can come in very handy.
- Click on'add new record' in the team groups screen and you can create a new team group name as well as choose which teams you wish to include in the group as shown below :-



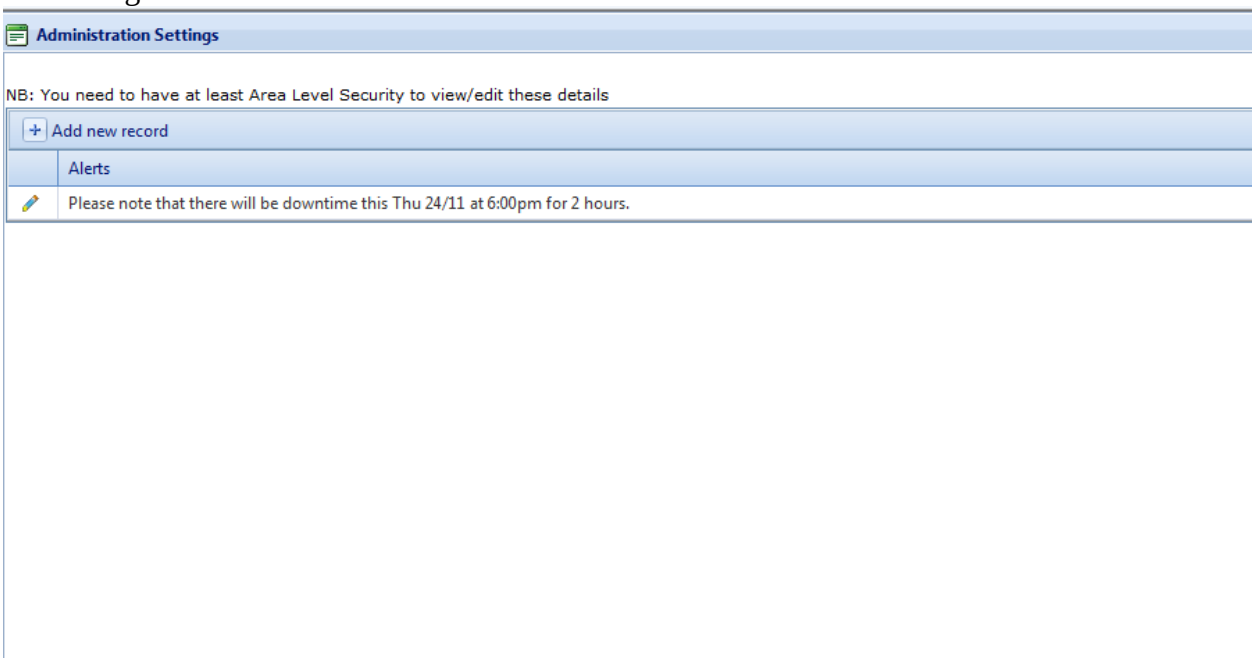

Refresh
Calendar
Current Episodes
All Episodes
Events
ACCR
Rehab
Palliative Care
Viewing Calendar for Cheryl MURPHY
today
Jul, 2009
Day
Week
Month
Timeline
Mon
Tue
Wed
Thu
Fri
Sat
Sun
Welcome Cheryl MURPHY
Logout
MRN:
Go
Surname:
First Name:
DOB:
Add New Client
Calendars
My Calendar
Team Groups
All OT's
Staff
My Area
My Facility
My Provider Unit
Alison NOBLE
Betty Beston-MER
Betty Beston-NAR
Client/Carer Groups
Team Groups
Administration
Reports
Bulletin Board
Change Password
Team Groups
Add new record
Refresh
Team Group
ALLOT All OT's
TeamGroup.aspx

Administration Section

Nb: Not all Administration options will be available to all users, depending on the users authority level

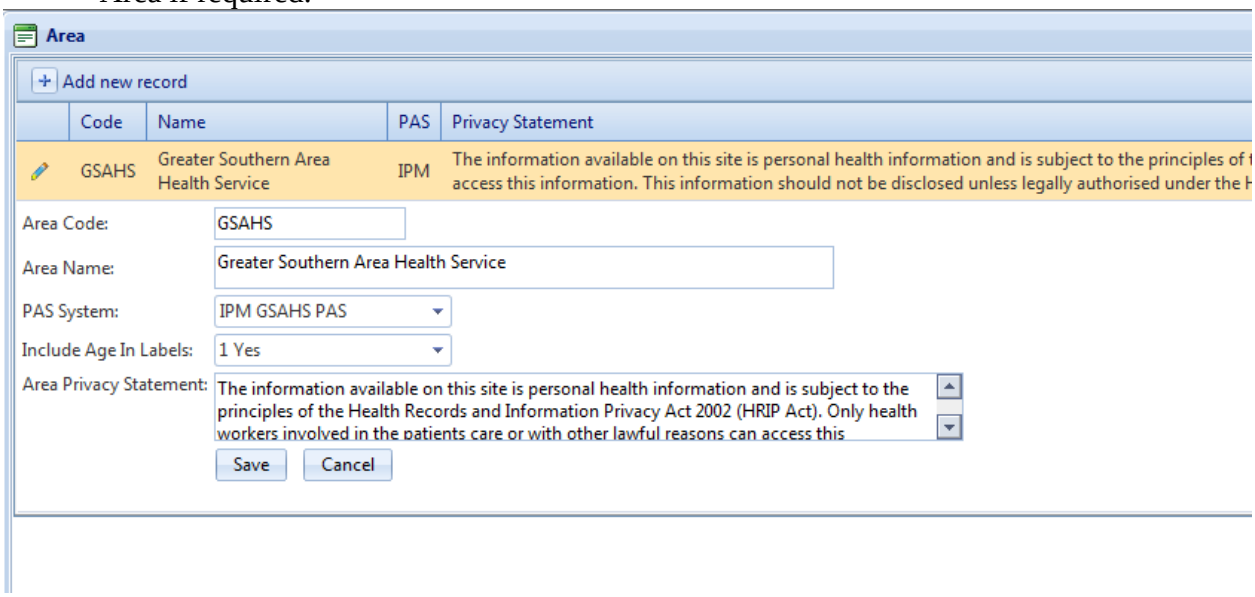
Administration Settings

- This allows you to show a message on the logon screen. The login screen will show the last message entered into the Administration Settings screen. In this case, the '…downtime till Thu 24/11….' Will appear on everyone's front login screen.


Administration Settings
NB: You need to have at least Area Level Security to view/edit these details
Add new record
Alerts
Please note that there will be downtime this Thu 24/11 at 6:00pm for 2 hours.

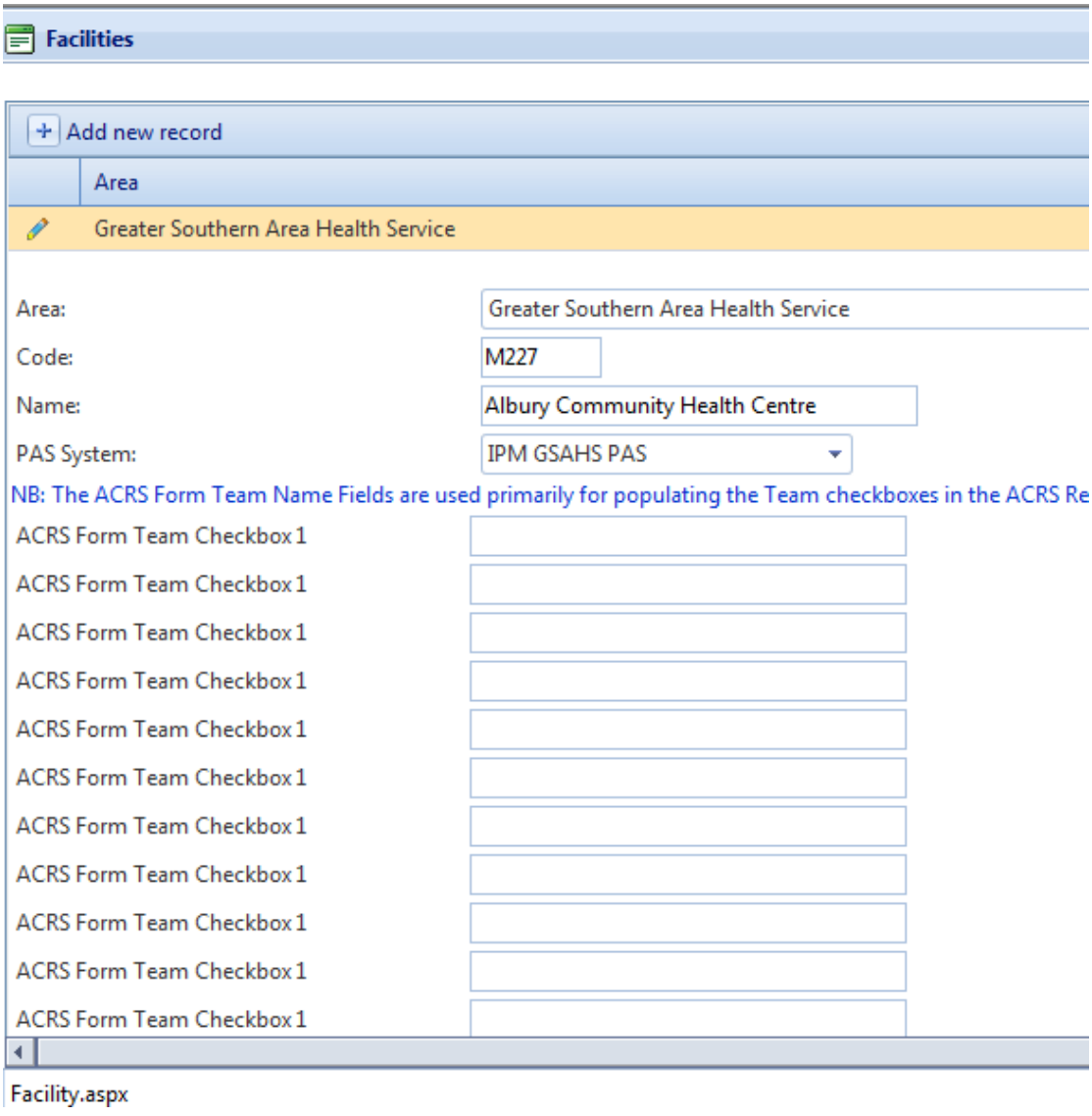
Area

- Shows details for the Area. You can change the privacy statement, choose whether to include the age field in client labels and change the name of the Area if required.


Area
Add new record
Code
Name
PAS
Privacy Statement
GSAHS
Greater Southern Area Health Service
IPM
The information available on this site is personal health information and is subject to the principles of
access this information. This information should not be disclosed unless legally authorised under the
Area Code:
GSAHS
Area Name:
Greater Southern Area Health Service
PAS System:
IPM GSAHS PAS
Include Age In Labels:
1 Yes
Area Privacy Statement:
The information available on this site is personal health information and is subject to the principles of the Health Records and Information Privacy Act 2002 (HRIP Act). Only health workers involved in the patients care or with other lawful reasons can access this
Save
Cancel

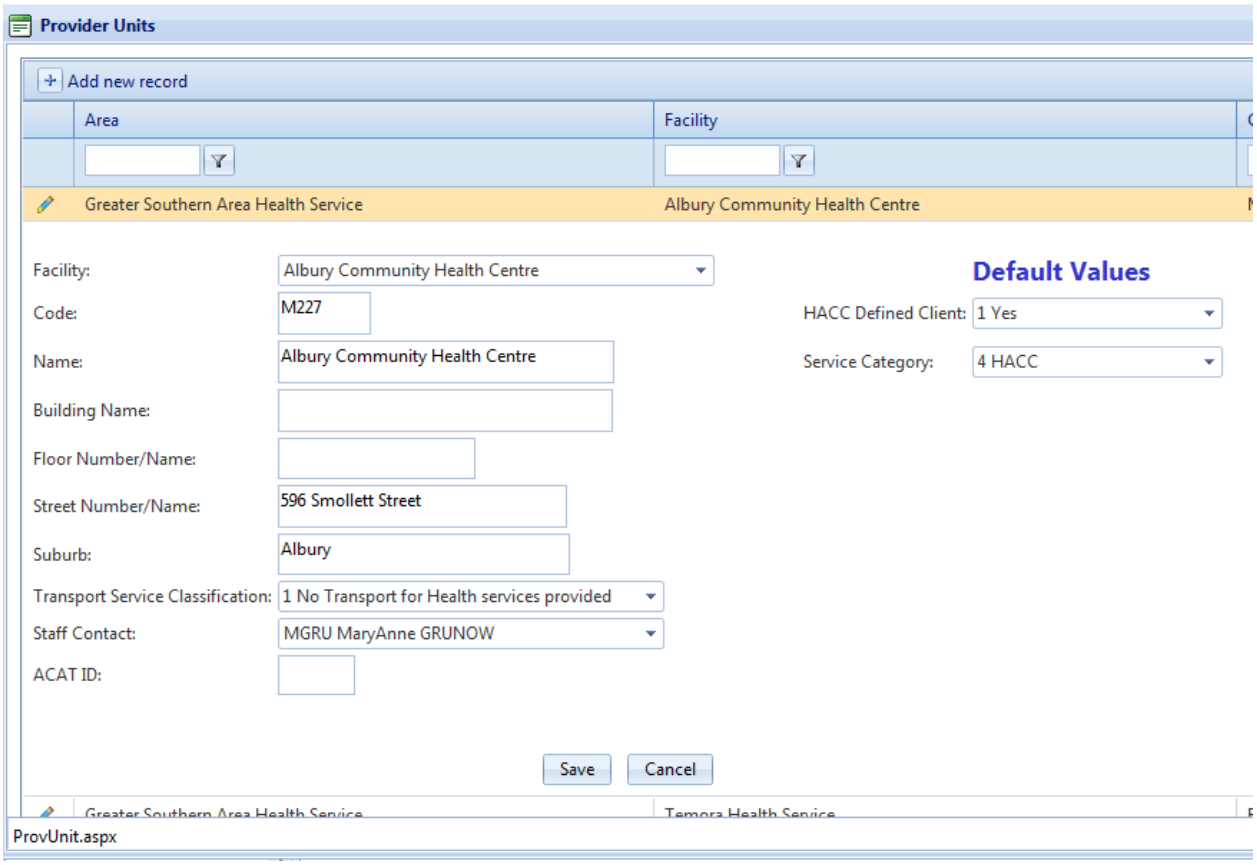
Facility

- You can add/edit Facilities from this screen. One thing to note is the 'ACRS Form Team Checkbox' fields. These can be left blank, but if you are using the ACRS Referral Forms, you can fill in these values with Team Names so that they appear on the referral forms with their own checkboxes.


Facilities
Add new record
Area
Greater Southern Area Health Service
Area:
Greater Southern Area Health Service
Code:
M227
Name:
Albury Community Health Centre
PAS System:
IPM GSAHS PAS
NB: The ACRS Form Team Name Fields are used primarily for populating the Team checkboxes in the ACRS Re
ACRS Form Team Checkbox 1
ACRS Form Team Checkbox 1
ACRS Form Team Checkbox 1
ACRS Form Team Checkbox 1
ACRS Form Team Checkbox 1
ACRS Form Team Checkbox 1
ACRS Form Team Checkbox 1
ACRS Form Team Checkbox 1
ACRS Form Team Checkbox 1
ACRS Form Team Checkbox 1
ACRS Form Team Checkbox 1
Facility.aspx

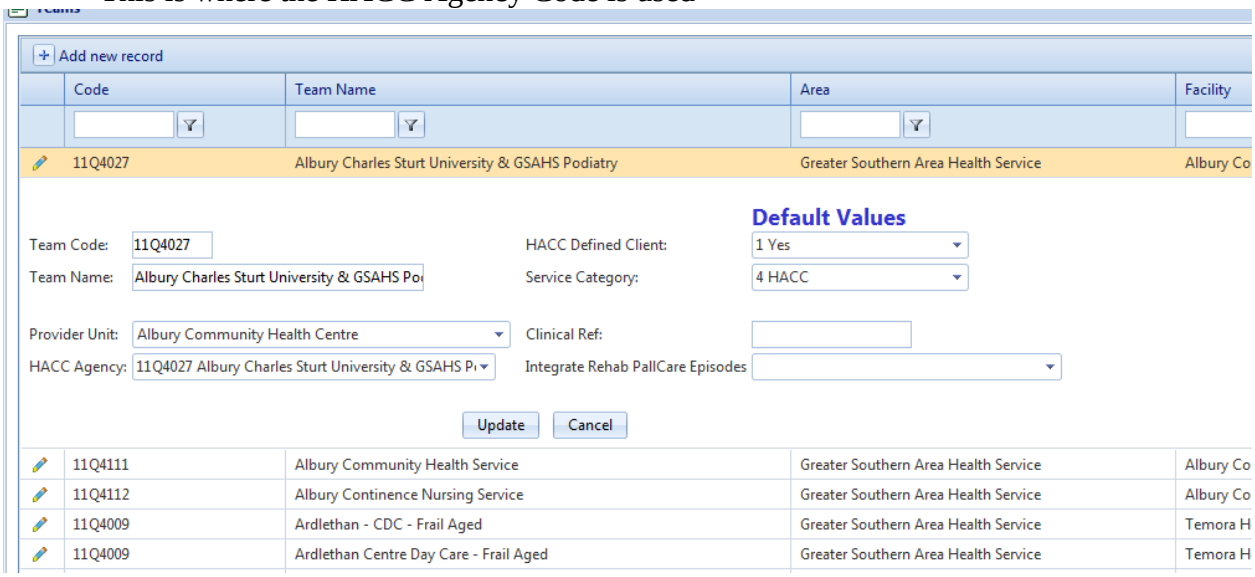
Provider Unit

- If you have the correct authority, you can add or edit Provider Units as shown below
- The Default values fields allow any new episodes that is linked to that provider unit/Team (by staff name) to contain those values by default (unless overriding default values exist inTeam or Staff



Team

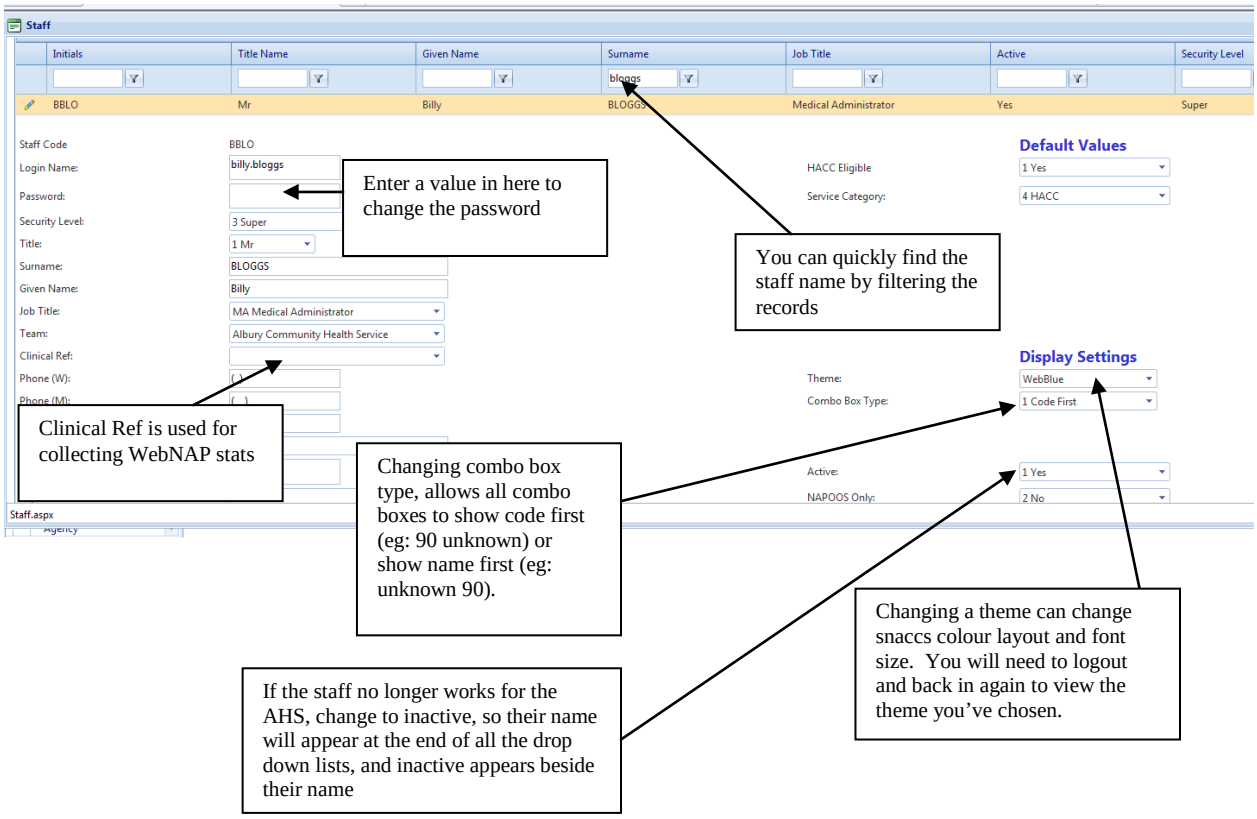
- If you have the correct authority, you can add or edit a Team as shown below
- The Default values fields allow any new episodes that is linked to that Team (by staff name) to contain those values by default (unless overriding default values exist inTeam or Staff
- A Team can sometimes be the same as the provider unit, but you may have a group of divisions/teams within your provider unit that you wish to identify and this is where teams come in handy
- This is where the HACC Agency Code is used



Staff

- You can edit details of your own staff details, or if you have the correct authority, you can add or edit other staff members details

- Shows staff belonging to your team (if you have the required authority)

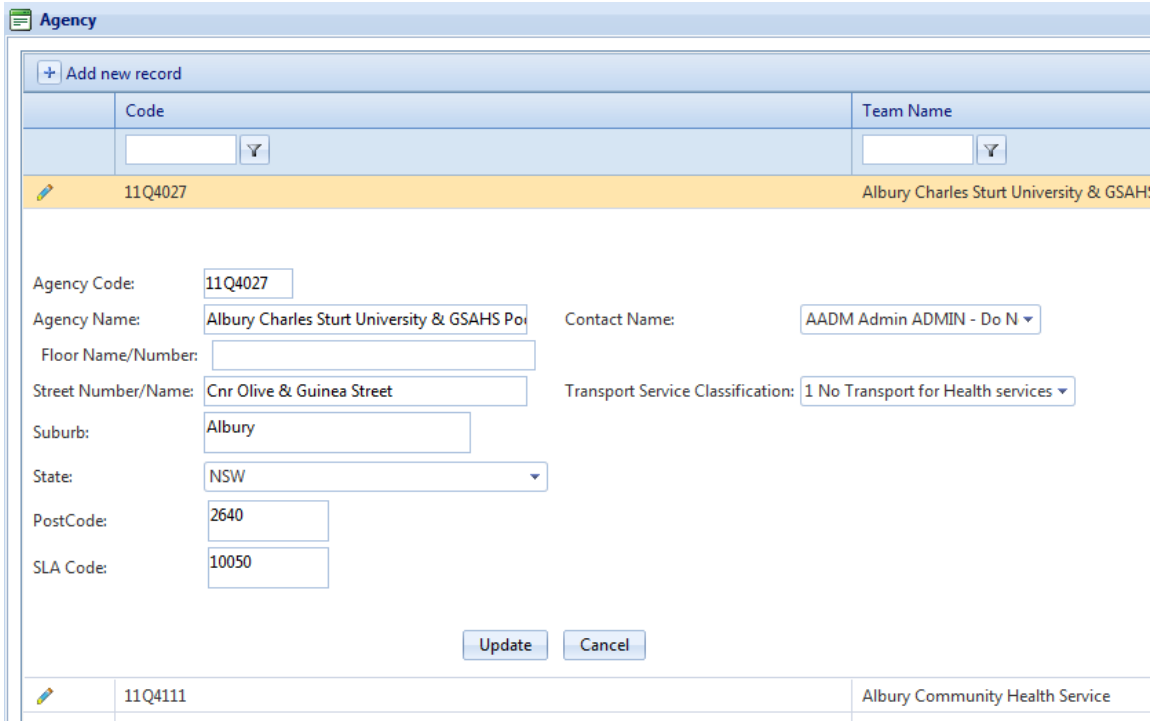


- The Default values fields allow any new episodes that are linked to that Staff Name to contain those values.

Nb:After changing either of the display setting values, you will need to logout of snacc and then back in to make the changes appear.

Agency

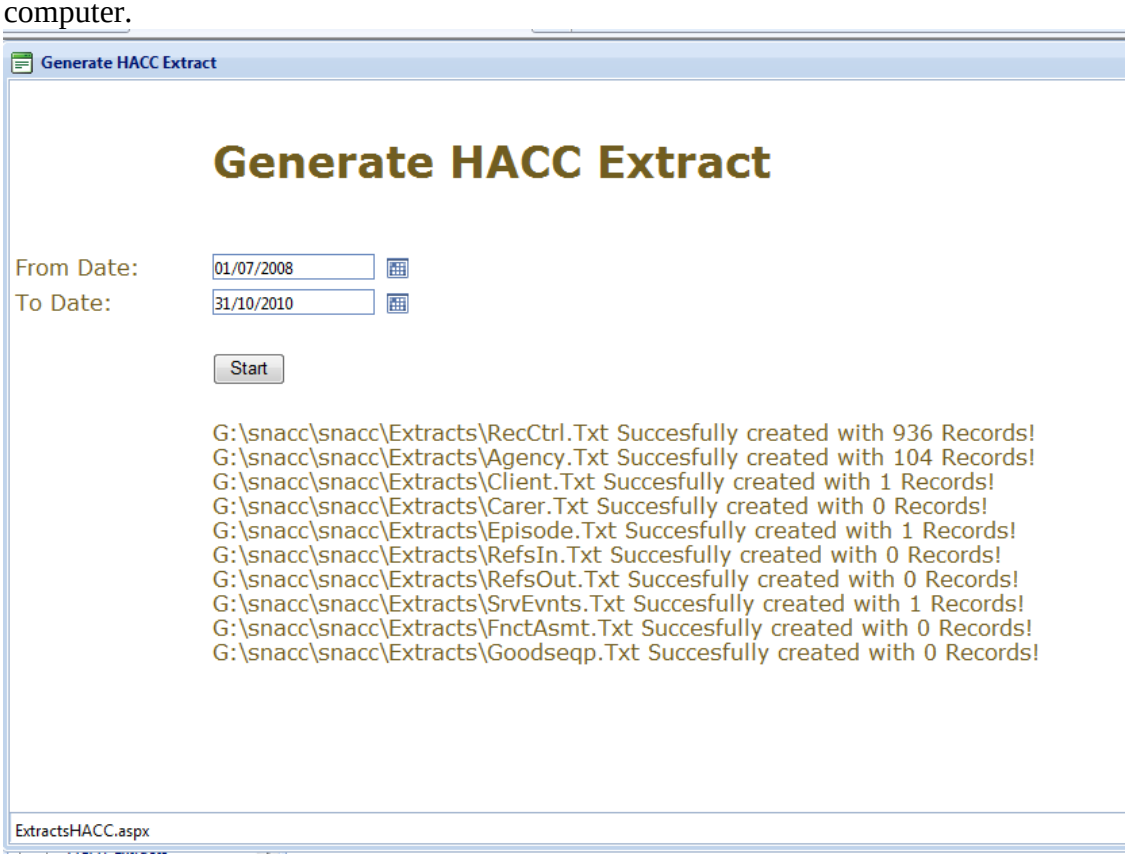
- You can change details of the HACC Agency Codes here. Obviously this should be performed with caution as it may affect HACC Extract Results



HACC Extracts

Note:This is for the HACC Co-Ordinator only

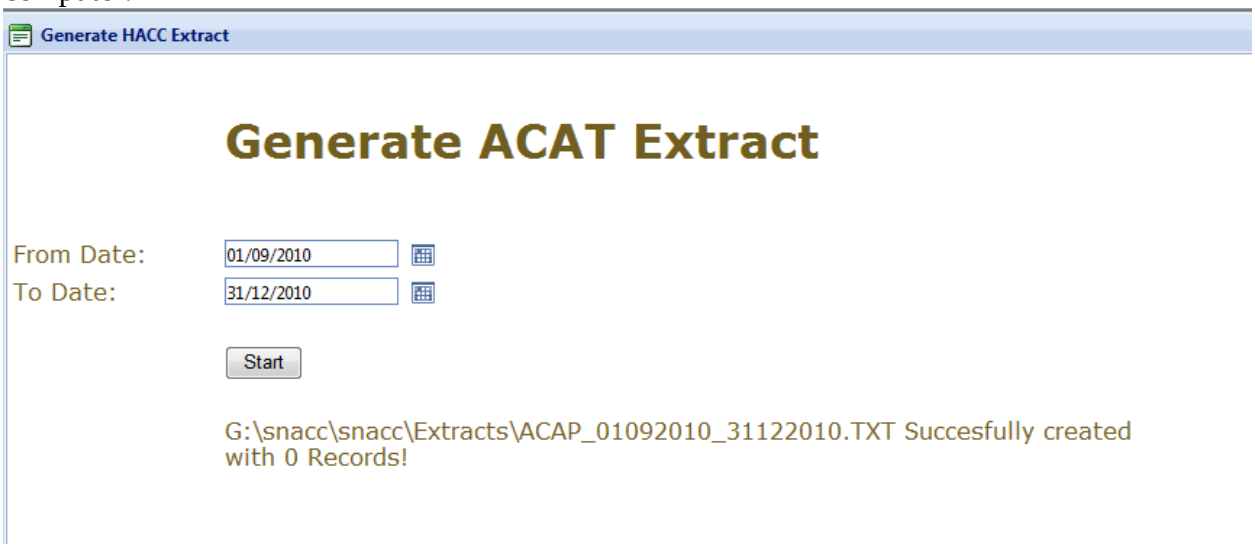
The HACC Co-Ordinator used this option to generate the HACC Extracts, for checking in the HACC Repository and sending of NSW Health. The HACC Co-Ordinator enters in the date range they wish to run the extracts for and it will tell them where the extracts have been created as shown below. Remember that because this is a web application, the saved location is the location on the web server, not the local computer.


Generate HACC Extract
Generate HACC Extract
From Date:
01/07/2008
To Date:
31/10/2010
Start
G:\snacc\snacc\Extracts\RecCtrl.Txt Succesfully created with 936 Records!
G:\snacc\snacc\Extracts\Agency.Txt Succesfully created with 104 Records!
G:\snacc\snacc\Extracts\Client.Txt Succesfully created with 1 Records!
G:\snacc\snacc\Extracts\Carer.Txt Succesfully created with 0 Records!
G:\snacc\snacc\Extracts\Episode.Txt Succesfully created with 1 Records!
G:\snacc\snacc\Extracts\RefsIn.Txt Succesfully created with 0 Records!
G:\snacc\snacc\Extracts\RefsOut.Txt Succesfully created with 0 Records!
G:\snacc\snacc\Extracts\SrvEvnts.Txt Succesfully created with 1 Records!
G:\snacc\snacc\Extracts\FnctAsmt.Txt Succesfully created with 0 Records!
G:\snacc\snacc\Extracts\Goodseqp.Txt Succesfully created with 0 Records!
ExtractsHACC.aspx

ACAT Extracts

Note:This is for the ACAT Co-Ordinator only

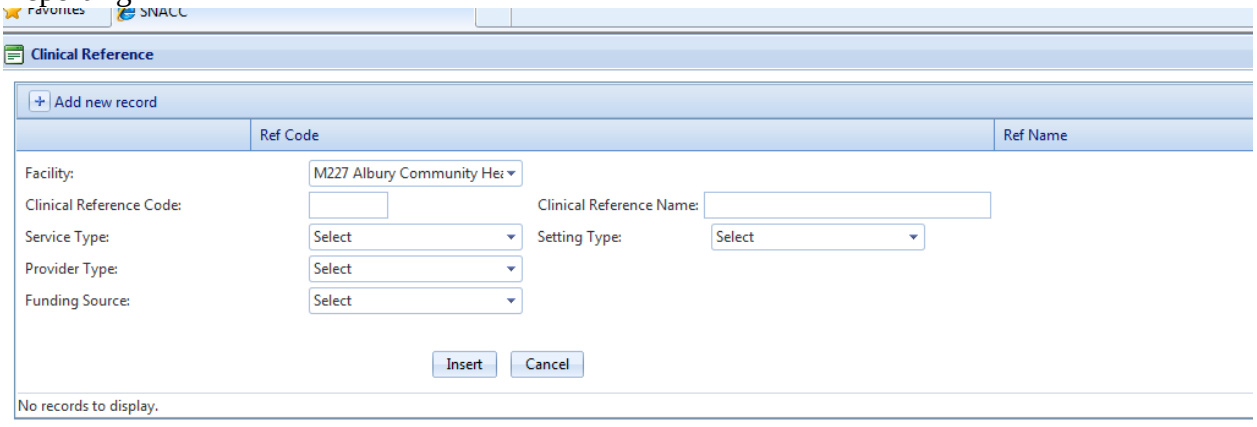
This is where you generate the ACAT Extracts, for sending to the Commonwealth. Simply Enter in the date range you wish to run the extracts for and it will tell you where the extracts have been created as shown below. Remember that because this is a web application, the saved location is the location on the web server, not your local computer.



NB: The example above, shows 0 records because there aren't any ACCR's on this particular test database.

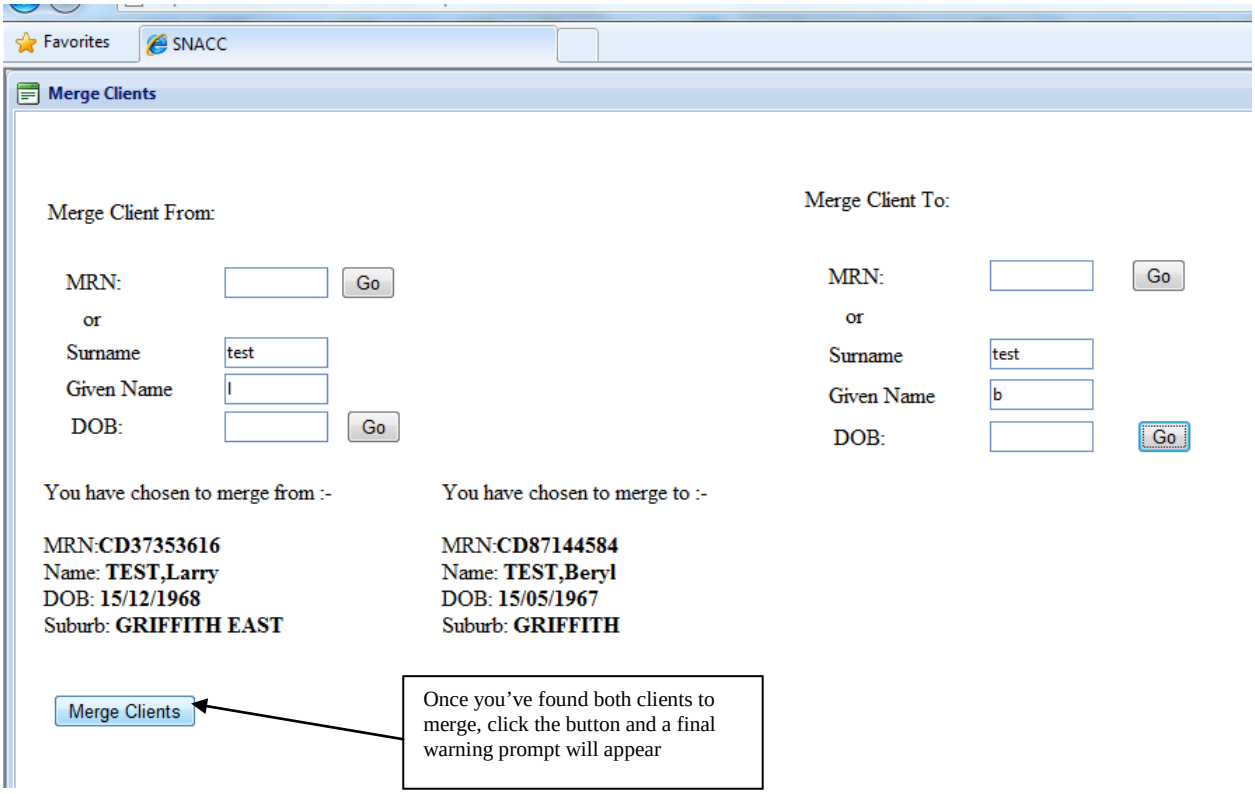
Clinical Reference

This is for creating Clinical Reference Numbers for WebNAP Reporting



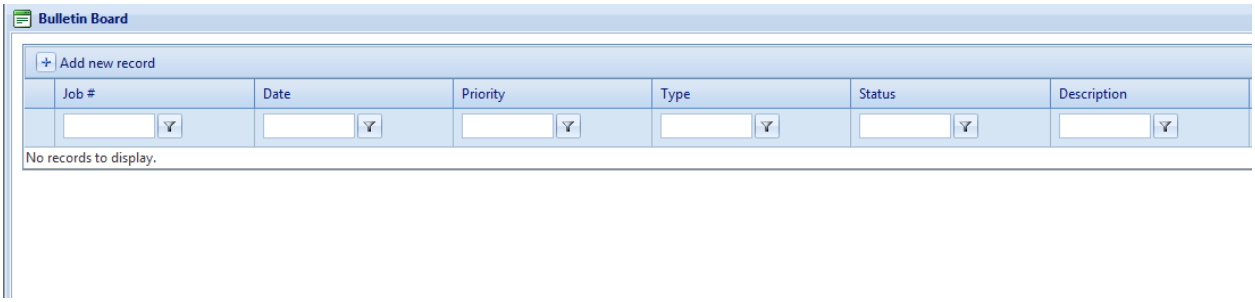
Merge Clients

Merging Clients allows you to choose two client's in the same way you use the search client option and move all episode, event, contacts etc. from one client into the other. Once Complete the Client's demographics that you moved the records'from' will be deleted.



Bulletin Board

- The Bulletin Board is not currently in use, but was used previously to track progress on any changes to the development of SNACC



Security Levels

Due to Staff within NSCCAHS (expecially ED's) requiring access to all client records, regardless of facility, it was necessary to change the security level access. Previously, the security level access was as follows :-

Security Level	Security Name	Access Level
1	DBAdmin	Entire Database can read/write
2	AreaAdmin	Entire Area can read/write. No Access Other Areas
3	Super	Entire Facility can write, Other Facilities Read only and no delete. No Access Other Areas
4	Clerical	Entire Provider Unit can write, Other Provider Units and Facilities Read Only and no delete. No Access Other Areas,
5	Clinical	Entire Team can write, Other Provider Units and Facilities Read Only and no delete. No Access Other Areas,

NB: During client search, unless security Level 1 is used (search results entire database), then the entire area client search results are used.

Differences between Case Management, Care Co-Ordination and Assessment

How can we differentiate Case management, Assessment and Client care co-ordination as assistance types? Case Management refers to a collaborative and Client-focussed process for managing support provision to people with chronic, ongoing or complex conditions. This usually involves a case manager and several other key persons in determining support provisions needed by a Client. Record Case management for a Community Options model only.

Assessment refers to activities of eligibility and access to services that are attributable to individual care recipients (Clients and/or Carers). This varies from Agency to Agency, but can be related to updating Client records regarding eligibility, support needs, service response and prioritising service provision. Record this only if time spent is 30 minutes or more.

Client Care Coordination refers to the coordination of activities undertaken to facilitate access to HACC services for Clients who need help to gain access to more than one assistance type. Record this only if time spent is 30 minutes or more (if less, record as Counselling/support, information, referral and advocacy-Client).

For a more comprehensive differentiation between the above primary assistance types, please refer to pages 211-213 of the Data Dictionary and Collection Guidelines for the NSW Health HACC MDS v2, which can be found at: http://www.health.nsw.gov.au/data/hacc.

For Further information please contact your Area HACC Co-Ordinator or

Refer to the following documents.

Orientation Workbook for the NSW Health Home and Community Care Minimum data Set Version 2
http://www.health.nsw.gov.au/pubs/2009/health_home_comm_wb.html

NSW Health Policy Drective 2008_050 Home and Community Care Minimum data Set Version 2 – Collection & Reporting Requirements
http://www.health.nsw.gov.au/policies/pd/2008/PD2008_050.html

Lookup Tables

Accommodation

05	Boarding house/private hotel	01	Privately owned house/flat/mobile home
04	Independent living unit within a retirement village	09	Public place/temporary shelter
08	Institutional setting	02	Rented house/flat/mobile home (private rental)
99	Not stated/not known/inadequately described	03	Rented house/flat/mobile home (public rental)
98	Other	06	Short-term crisis, emergency or transitional residential facility
10	Private residence rented from Aboriginal Community	07	Supported accommodation or supported living facility

Benefit Status

01	Aged Pension	98	Other
04	Carer Payment (Pension)	07	Other government pension or benefit
11	Dependent on others	09	Part-time employment
03	Disability Support Pension	10	Retirement fund
08	Full-time employment	06	Student allowance
12	No income	05	Unemployment-related benefit
99	Not stated/not known/inadequately described	02	Veterans' Affairs Pension

Country of Birth

1601	Adelie Land (France)	1605	Chilean Antarctic Territory
7201	Afghanistan	6101	China (excludes SARs and Taiwan Province)
0918	Africa, NFD	6100	Chinese Asia, NFD (includes Mongolia)
3201	Albania	8205	Colombia
4101	Algeria	9204	Comoros
8000	Americas, NFD	9107	Congo
3101	Andorra	9108	Congo, Democratic Republic of
9201	Angola	1501	Cook Islands
8401	Anguilla	8302	Costa Rica
1600	Antarctica, NFD	9111	Cote d'Ivoire
8402	Antigua and Barbuda	3204	Croatia
8201	Argentina	8407	Cuba
1602	Argentinian Antarctic Territory	3205	Cyprus
7202	Armenia	3302	Czech Republic
8403	Aruba	2401	Denmark
0917	Asia, NFD	9205	Djibouti
1101	Australia	8408	Dominica
1603	Australian Antarctic Territory	8411	Dominican Republic
1199	Australian External Territories, NEC	5206	East Timor
2301	Austria	3300	Eastern Europe, NFD
7203	Azerbaijan	8206	Ecuador
8404	Bahamas	4102	Egypt
4201	Bahrain	8303	El Salvador
7101	Bangladesh	2102	England
8405	Barbados	9112	Equatorial Guinea
3301	Belarus	9206	Eritrea
2302	Belgium	3303	Estonia
8301	Belize	9207	Ethiopia
9101	Benin	0911	Europe, NFD
8101	Bermuda	2402	Faeroe Islands
7102	Bhutan	8207	Falkland Islands
8202	Bolivia	1502	Fiji
3202	Bosnia and Herzegovina	2403	Finland
9202	Botswana	0914	Former Czechoslovakia, NFD
8203	Brazil	0912	Former Union of Soviet Socialist Republics, NFD
1604	British Antarctic Territory	3206	Former Yugoslav Republic of Macedonia (FYROM)
5201	Brunei Darussalam	0913	Former Yugoslavia, NFD
3203	Bulgaria	2303	France
9102	Burkina Faso	8208	French Guiana
5101	Burma (Myanmar)	1503	French Polynesia
9203	Burundi	9113	Gabon
5102	Cambodia	9114	Gambia
9103	Cameroon	4202	Gaza Strip and West Bank
8102	Canada	7204	Georgia
9104	Cape Verde	2304	Germany
8400	Caribbean, NFD	9115	Ghana
8406	Cayman Islands	3102	Gibraltar
9105	Central African Republic	3207	Greece
8300	Central America, NFD	2404	Greenland
9100	Central and West Africa, NFD	8412	Grenada
7200	Central Asia, NFD	8413	Guadeloupe

9106	Chad		
2101	Channel Islands		
8204	Chile		

1401	Guam	1404	Micronesia, Federated States of
8304	Guatemala	3208	Moldova
9116	Guinea	2307	Monaco
9117	Guinea-Bissau	6104	Mongolia
8211	Guyana	8417	Montserrat
8414	Haiti	4104	Morocco
3103	Holy See	9216	Mozambique
8305	Honduras	9217	Namibia
6102	Hong Kong (SAR of China)	1405	Nauru
3304	Hungary	7105	Nepal
2405	Iceland	2308	Netherlands
7103	India	8418	Netherlands Antilles
5202	Indonesia	1301	New Caledonia
4203	Iran	1201	New Zealand
4204	Iraq	8307	Nicaragua
2201	Ireland, Republic of	9123	Niger
2103	Isle of Man	9124	Nigeria
4205	Israel	1504	Niue
3104	Italy	1102	Norfolk Island
8415	Jamaica	4199	North Africa, NEC
6201	Japan	6000	North-East Asia, NFD
4206	Jordan	8100	Northern America, NFD
7205	Kazakhstan	2400	Northern Europe, NFD
9208	Kenya	2104	Northern Ireland
1402	Kiribati	1406	Northern Mariana Islands
6202	Korea, Democratic People's Republic of (North)	2000	North-West Europe, NFD
6203	Korea, Republic of (South)	2406	Norway
4207	Kuwait	1000	Oceania and Antarctica, NFD
7206	Kyrgyz Republic	4211	Oman
5103	Laos	7106	Pakistan
3305	Latvia	1407	Palau
4208	Lebanon	8308	Panama
9211	Lesotho	1302	Papua New Guinea
9118	Liberia	8212	Paraguay
4103	Libya	8213	Peru
2305	Liechtenstein	5204	Philippines
3306	Lithuania	3307	Poland
2306	Luxembourg	1599	Polynesia (excl Hawaii), NEC
6103	Macau (SAR of China)	3106	Portugal
9212	Madagascar	8421	Puerto Rico
5100	Mainland South-East Asia, NFD	4212	Qatar
9213	Malawi	1606	Queen Maud Land (Norway)
5203	Malaysia	9218	Reunion
7104	Maldives	3211	Romania
9121	Mali	1607	Ross Dependency (New Zealand)
3105	Malta	3308	Russian Federation
5200	Maritime South-East Asia, NFD	9221	Rwanda
1403	Marshall Islands	1505	Samoa
8416	Martinique	1506	Samoa, American
9122	Mauritania	3107	San Marino
9214	Mauritius	9125	Sao Tome and Principe
9215	Mayotte	4213	Saudi Arabia

1300	Melanesia, NFD	2105	Scotland
8306	Mexico	9126	Senegal
		3213	Serbia and Montenegro

9127	Sierra Leone	9226	Swaziland
5205	Singapore	2407	Sweden
3311	Slovakia	2311	Switzerland
3212	Slovenia	4214	Syria
1303	Solomon Islands	6105	Taiwan
9224	Somalia	7207	Tajikistan
9225	South Africa	9227	Tanzania
8299	South America, NEC	5104	Thailand
3200	South Eastern Europe, NFD	9128	Togo
5000	South-East Asia, NFD	1507	Tokelau
7000	Southern and Central Asia, NFD	1508	Tonga
9299	Southern and East Africa, NEC	8425	Trinidad and Tobago
3000	Southern and Eastern Europe, NFD	4106	Tunisia
7100	Southern Asia, NFD	4215	Turkey
3100	Southern Europe, NFD	7208	Turkmenistan
3108	Spain	8426	Turks and Caicos Islands
7107	Sri Lanka	1511	Tuvalu
9222	St Helena	9228	Uganda
8422	St Kitts and Nevis	3312	Ukraine
8423	St Lucia	4216	United Arab Emirates
8103	St Pierre and Miquelon	2100	United Kingdom
8424	St Vincent and the Grenadines	8104	United States of America
4105	Sudan	8215	Uruguay
8214	Suriname	7211	Uzbekistan

Carer for more than one person

4	No	2	Yes, two other persons
9	Not stated/not known/inadequately described	3	Yes, three or more other persons
1	Yes, one other person		

Carer Residency Status

1	Co-resident Carer	0	Not Stated/Not Known/Inadequately described
2	Non-resident		

End Reason

03	Agency cannot or will no longer provide assistance-Client needs unchanged	98	other
11	Client deceased	01	Service completed-improved Client status
10	Client left against advice	02	Transferred/referred to another service-improved Client status
09	Client left without notice	07	Transferred/referred to other community-based service-Client needs changed
08	Client moved out of area	06	Transferred/referred to other institutional setting-Client needs changed
04	Client terminated service by mutual agreement-Client needs unchanged	05	Transferred/referred to residential aged care-Client needs changed
99	Not stated/inadequately described		

Language Spoken At Home

8000	Aboriginal dialect, NFD	1402	Frisian
9201	Acholi 6101 Burmese	1101	Gaelic (Scotland)
8601	Adnymathanha (Yura Ngawarla)	1301	German
9299	African languages (excludesNorth Africa), NEC	9302	Gilbertese
9202	Afrikaans	2201	Greek
9203	Akan	8301	Gugu Yalanji
3901	Albanian	5202	Gujarati
8201	Alyawarr (Alyawarra)	8302	Guugu Yimidhirr
9101	American languages, NEC	7102	Hakka
4201	Amharic	4204	Hebrew
8101	Anindilyakwa	5203	Hindi
8202	Anmatyerr (Anmatyirra)	6201	Hmong
8602	Arabana (Arabuna)	6299	Hmong-Mien languages, NEC
4202	Arabic (including Lebanese)	7103	Hokkien
3902	Armenian	3301	Hungarian
3903	Aromunian (Macedo-Romanian)	2399	Iberian Romance, NEC
8203	Arrernte (Aranda)	1502	Icelandic
9204	Asante	6503	Ilokano
4203	Assyrian (includes Aramaic)	5299	Indo-Aryan, NEC
9701	Auslan	6504	Indonesian
8204	Bardi	9601	Invented languages
2901	Basque	4199	Iranic, NEC
3401	Belorussian	1102	Irish
5201	Bengali	2401	Italian
6501	Bisaya	7201	Japanese
3501	Bosnian	8206	Jaru (Djaru)
3502	Bulgarian	8401	Kalaw Lagaw Ya (Kalaw Kawa Ya)
8205	Bunuba (Bunaba)	5101	Kannada
8102	Burarra	8107	Karrwa (Garawa,Garrwa)
6199	Burman, NEC	6301	Khmer
7101	Cantonese	8207	Kija (Gidya)
8399	Cape York Peninsula Aboriginal,NEC	5204	Konkani
2301	Catalan	7301	Korean
6502	Cebuano	8701	Kriol
1199	Celtic, NEC	8211	Kukatha (Gugada, Kokatha)
8299	Central Aboriginal, NEC	8212	Kukatja (Gugaja)
7199	Chinese, NEC	8108	Kunwinjku (Gunwinggu)
3503	Croatian	4101	Kurdish
3601	Czech	8303	Kuuku-Ya'u
1501	Danish	8208	Kuurinji (Gurindji)
8103	Dhaangu	6401	Lao
8104	Dhay'yi	2902	Latin
8105	Dhuwal-Dhuwala	3101	Latvian
8106	Djinang	1302	Letzeburgish
5199	Dravidian, NEC	3102	Lithuanian
8699	Eastern Aboriginal, NEC	3504	Macedonian
1201	English	9702	Makaton
3201	Estonian	6505	Malay
9301	Fijian	5102	Malayalam
3299	Finnic, NEC	2501	Maltese

3202	Finnish	7104	Mandarin
2101	French	9303	Maori (Cook Island)
9304	Maori (New Zealand)	3505	Serbian
5205	Marathi	9207	Shona
8111	Maung	9799	Sign languages, NEC
9205	Mauritian Creole	5208	Sindhi
8402	Meryam Mir	5211	Sinhalese
4299	Middle Eastern and North African languages, NEC	3603	Slovak
8213	Miriwoong	3506	Slovene
6399	Mon-Khmer, NEC	9208	Somali
9305	Motu	2303	Spanish
8112	Murrinh-Patha	9211	Swahili
8214	Mutpurra (Mudburra)	1504	Swedish
9306	Nauruan	6506	Tagalog (Filipino)
5206	Nepali	5103	Tamil
1401	Netherlandic	5104	Telugu
8215	Ngaatjatjara	7105	Teochew
8113	Ngangkikurungurr	6507	Tetum
8501	Ngarluma	6402	Thai
9307	Niue	6499	Thi, NEC
8199	Northern Aboriginal, NEC	4205	Tigrinya
1503	Norwegian	6508	Timorese
8114	Nunggubuyu	8117	Tiwi
8216	Nyangumarta	9401	Tok Pisin (Pidgen English)
8502	Nyungar (Noongar)	9311	Tongan
9499	Oceanian Pidgins and Creoles,NEC	8702	Torres Strait Creole (Broken)
9399	Oceanic Austronesian languages,NEC	8400	Torres Strait Islander dialect, NFD
9206	Oromo	4301	Turkish
7999	Other Eastern Asian languages,NEC	4399	Turkish and Central Asian languages, NEC
3999	Other Eastern European languages, NEC	3403	Ukranian
6999	Other Southeast Asian languages (Chavacano), NEC	5212	Urdu
5999	Other Southern Asian languages,NEC	6302	Vietnamese
2999	Other Southern European languages, NEC	8221	Walmajarri (Walmadjari)
9501	Papuan languages, NEC	8223	Warlpiri
4102	Pashto	8222	Warumungu (Warumunga)
4103	Persian	1103	Welsh
8217	Pintupi	8599	West Coast Aboriginal, NEC
8218	Pitjantjatjara	6599	Western Austronesian languages, NEC
3602	Polish	8304	Wik-Mungkan
2302	Portugese	7106	Wu
5207	Punjabi	8225	Yankunytjatjara
8115	Rembarrnga	8118	Yanyuwa (Anula)
8116	Ritharrngu	1303	Yiddish
3904	Romanian	8503	Yindjibarndi
3402	Russian	9212	Yoruba
9308	Samoan	8224	Yulparija
1599	Scandinavian, NEC (Faeroese)	9213	Zulu

Living Arrangement

01	Alone	06	Parent(s)
08	Friend(s)	02	Spouse/partner
09	Friend(s)/parent(s)/relative(s) and child(ren)	05	Spouse/partner and child(ren)
99	Not stated/not known/inadequately described	03	With child(ren) (dependent) only
98	Other	04	With child(ren) (non-dependent) only
07	Other relative(s)		

Primary Assistance Received

02	Assessment (including screening)-Carer	88	Home maintenance
01	Assessment (including screening)-Client	89	Home modification
10	Case management	81	Meals
45	Centre-based day care	66	Occupational therapy
22	Client care co-ordination-Carer	82	Other food services
21	Client care co-ordination-Client	79	Other support by Allied Health professional
51	Continence care	53	Palliative care generalist nursing
32	Counselling/support, information, referral and advocacy-Carer	43	Personal care
31	Counselling/support, information, referral and advocacy-Client	67	Physiotherapy
52	Dementia nursing	56	Podiatry
70	Dietetics/nutrition	90	Provision of goods and equipment
68	Diversional therapy	46	Respite care
41	Domestic assistance	42	Social support/dementia monitoring
55	Foot care	71	Social work
85	Formal linen service	69	Speech pathology
78	General and other nursing support	96	Transport-Carer
60	Hearing assessment	95	Transport-Client
		54	Wound management

Referral Source

58	Other non-residential community health service	41	Professional personal carer
28	Other residential care service	10	Psychiatric hospital
98	Other source of referral	01	Public hospital
22	Palliative care facility/hospice (residential)	26	Residential aged care facility (government)
07	Private hospital	27	Residential aged care facility (non-government)
45	Private practice, medical general practice	00	Self Referral - no formal or informal referral
48	Private practice, other	53	Specialist aged or disability assessment team/service

Referral Target

21	Community mental health service (residential)	71	Other Aboriginal and Torres Strait Islander community-based service agency (eg, LALC/AHO)
94	Community Options Program service (COPS)	78	Other community-based non-government service agency
52	Community palliative care service (non-residential)	68	Other community-based non-health government service agency
91	Community transport service	18	Other hospital or day procedure centre
95	Community/Aged Care Package service	58	Other non-residential community health service
56	Community/domiciliary allied health service	28	Other residential care service
55	Community/domiciliary nursing service	98	Other target of referral

61	Comprehensive HACC assessment authority	22	Palliative care facility/hospice (residential)
35	Day care centre/respite care centre	07	Private hospital
62	DVA home care service	45	Private practice, medical general practice
31	Emergency services	48	Private practice, other
25	Extended care/rehabilitation facility	41	Professional personal carer
92	Home maintenance/modifications service	10	Psychiatric hospital
67	Law enforcement/criminal justice	01	Public hospital
93	Meals service	26	Residential aged care facility (government)
12	Multi-Purpose Service	27	Residential aged care facility (non-government)
99	No referral	53	Specialist aged or disability assessment team/service

Relationship of Carer to Client

6	Friend/Neighbour	3	Son or Daughter
9	Not Stated/Not Known/Inadequately described	4	Son-in-law or Daughter-in-law
5	Other Relative	1	Spouse/Partner
2	Parent		

Relationship of Contact to Client

12	Agency/Office Holder as Guardian/Agent	99	Not Elsewhere Classified
13	Aunt	03	Mother
14	Brother	28	Neighbour
15	Case Worker/Case Manager	29	Nephew
16	Coach	30	Niece
07	Daughter	09	Other Relative
17	Defacto	31	Paid Carer/Professional Carer
18	Employee	32	Parent nfd
19	Employer	33	Partner
20	Ex-Partner/Ex-Spouse	34	Self
04	Father	35	Sister
21	Foster Father	06	Son
22	Foster Mother	36	Step Father
11	Friend	37	Step Mother
23	GP/Local Medical Officer	38	Teacher
24	Grandfather	39	Uncle
25	Grandmother	98	Unknown
26	Guardian	01	Wife
02	Husband	40	Work Colleague
27	Legal Representative		

Service Delivery Setting

54	Aboriginal and Torres Strait Islander Health Service	88	Other public place (street, park, etc)
00	Client's/Carer's home	28	Other residential care service
57	Community Health Centre	22	Palliative care facility/hospice (residential)
51	Community mental health service (non-residential)	07	Private hospital
21	Community mental health service (residential)	45	Private practice, medical general practice
52	Community palliative care service (non-residential)	48	Private practice, other
35	Day care centre/respite care centre	10	Psychiatric hospital
25	Extended care/rehabilitation facility	01	Public hospital
67	Law enforcement/criminal justice	81	Recreational/social facility
12	Multi-Purpose Service	26	Residential aged care facility (government)
18	Other hospital or day procedure centre	27	Residential aged care facility (non-government)
98	Other location	82	Shopping facility
58	Other non-residential community health service		

Transport Mode

52	Aircraft-operated by Ambulance Service of NSW	28	Bus-other
57	Aircraft-operated by private operator	21	Bus-owned by Agency/service provider
58	Aircraft-other	38	Car-other
51	Aircraft-owned by Agency/service provider	31	Car-owned by Agency/service provider
12	Ambulance-operated by Ambulance Service of NSW	32	Car-owned by the Client/Carer
17	Ambulance-operated by private operator	98	Other
18	Ambulance-other	48	Taxi
11	Ambulance-owned by Agency/service provider	78	Train
27	Bus-operated by private operator	68	Watercraft
22	Bus-operated by State Transit Authority of NSW		

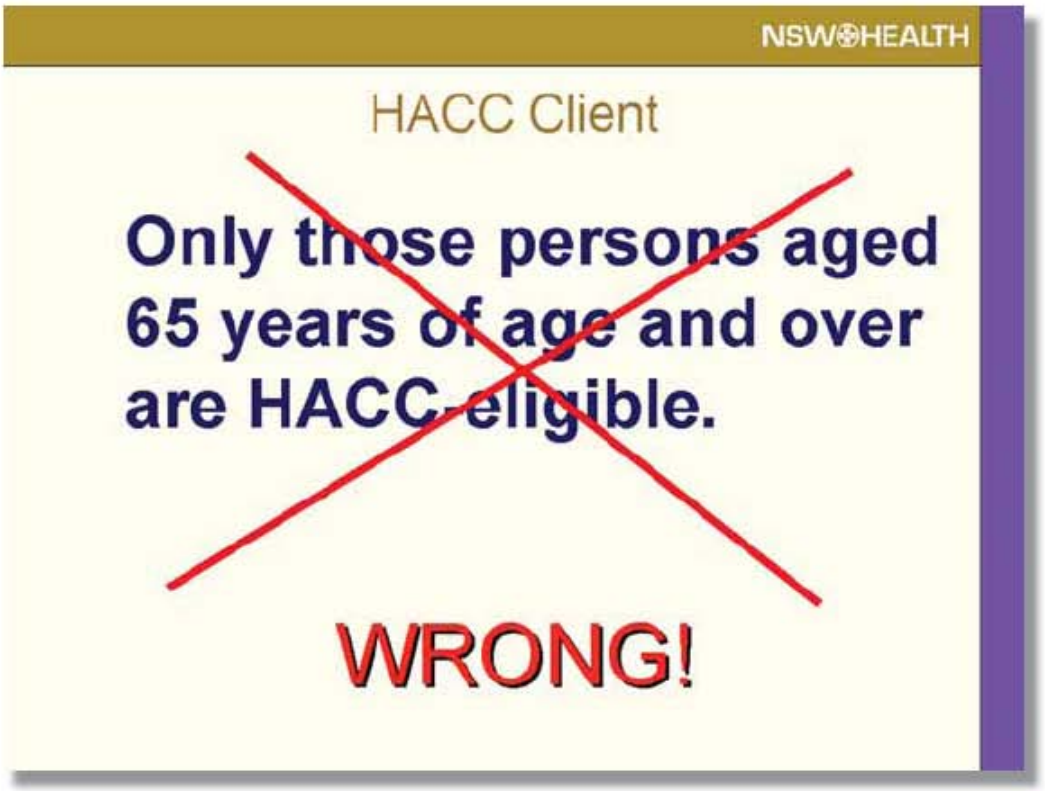
Type of Assistance with Goods and Equipment Received

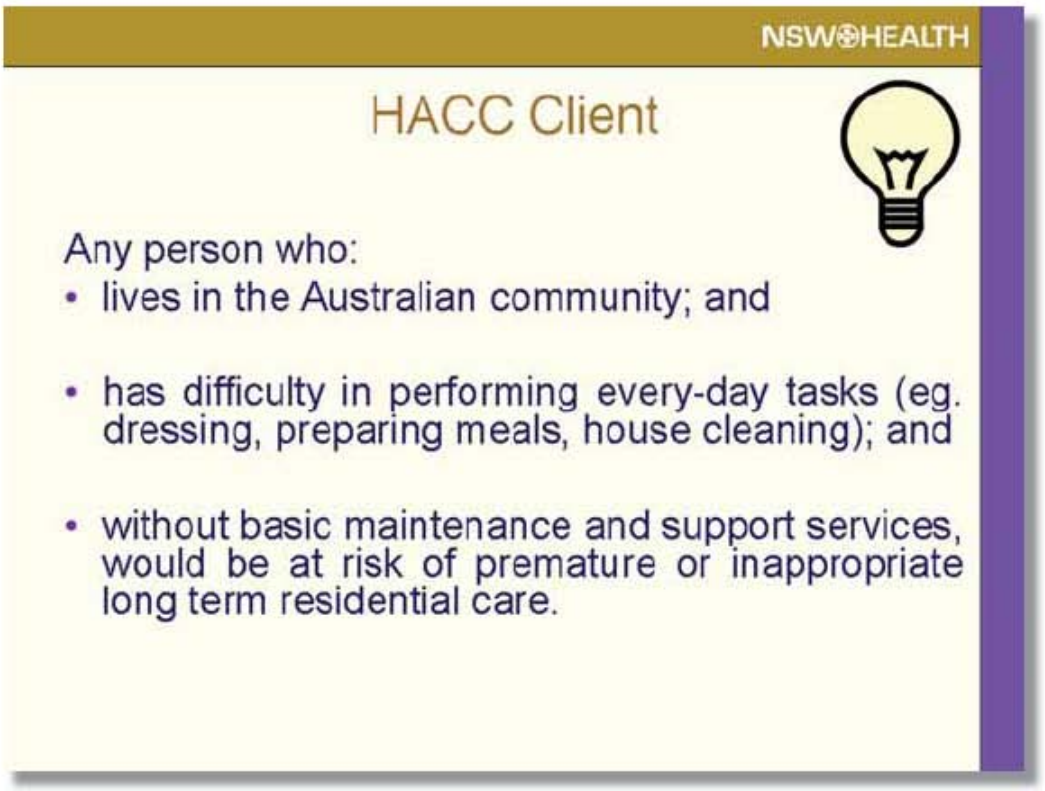
23	Ankle/knee strap, built up shoe, foot/leg support NEC	27	Henry lifter, hoist, patient lifter Scooter
06	Bag, urinal, incontinence pad, uredome, urinary appliances	73	Ostomy appliances/Stoma appliances, etc (excluding colostomy bag)
33	Bars/hooks/rails/straps-attached to walls, etc for support and mobility	58	Other aids for communication NEC Aids for reading
21	Belts, braces, neck collar, corsets	78	Other aids for medical care NEC
62	Books-large print/talking, cassette recorders/players, etc	18	Other aids for self care NEC Support and mobility aids
07	Bowel appliances-colostomy bag, bowel pad, etc	38	Other aids for support or mobility NEC Communication aids
61	Braille books/items/watch	48	Other hearing or speaking communication aids NEC
70	Breathing pumps-oxygen masks, ventilator, etc	68	Other reading or sight aids NEC Medical care aids
20	Callipers, splints	63	Reading frame, page turners, reading aids not associated with loss of sight
03	Clothes preparation aids-special iron, etc	31	Sonic beam, laser cane, optacon
44	Computers-Kurzweil personal reader, communication	45	Speaking aids-electrolarynx
60	Contact lenses, reading/magnifying glasses, etc	29	Special bed, cushions/pillows for support, etc
01	Cooking aids (excluding eating utensils)	42	Telephone attachment or adaptation (eg, answering service,flashing light, headpiece, TTY telephone)
22	Crutches for support, walking frame/stick	41	Teletext
71	Dialysis machine, kidney functioning machines	08	Toilet chair, commode, frame, conventional toilet use aids
04	Dressing aids-button hook, clothes tongs, zip pull, etc	24	Transporter chair, pusher, tricycle, etc
50	Dwelling modification to aid communication-intercom	05	Washing aids-bath rails/hoist/seat, shower rails/fitting/seat, etc
02	Eating aids-crockery, cutlery, plate guard, bowl guard, etc	25	Wheelchair-manual or unspecified
28	Ejector chair, hard-back chair, made to measure chair, chair NEC	26	Wheelchair-motorised
32	Guide dog	30	White cane
40	Hearing aids	77	Wound care products/dressing packs, etc
72	Heart stimulus/functioning machines, pacemaker, etc	43	Writing aids (eg, mouthstick, writing pad, typewriter, communication board)

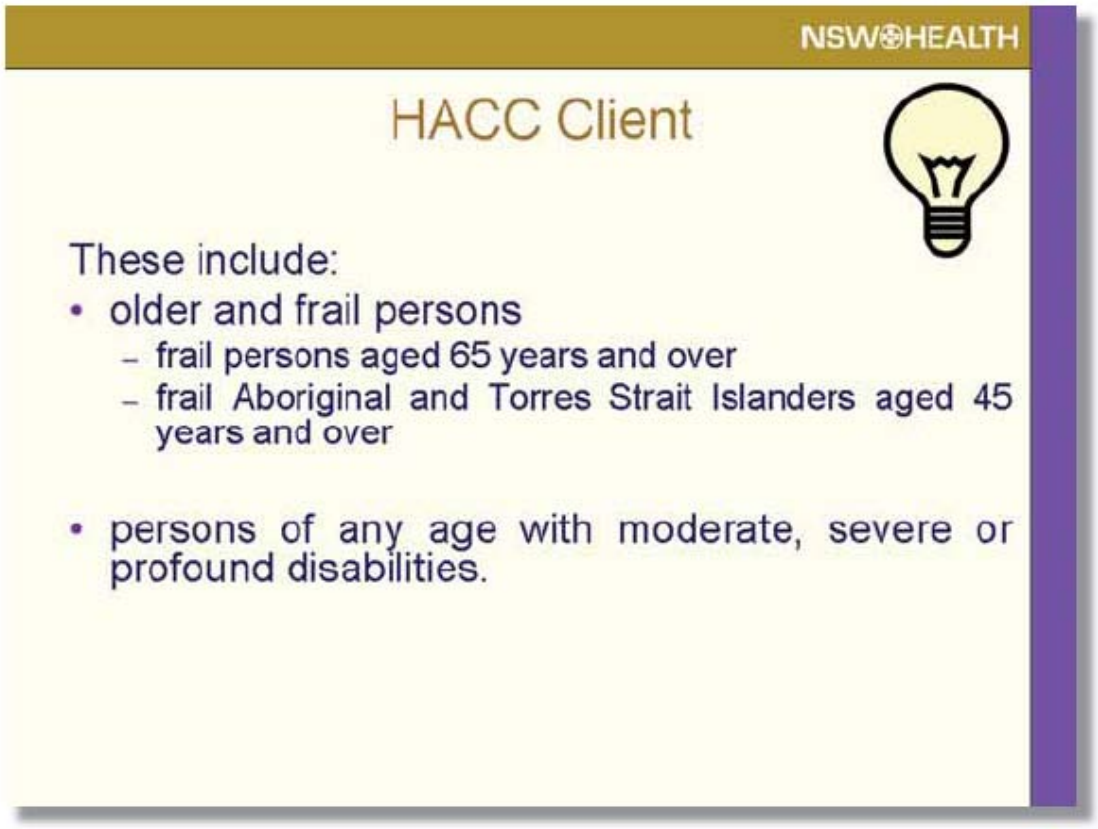
Appendices

Who is a HACC Client

HACC Client


NSW HEALTH
HACC Client
Only those persons aged 65 years of age and over are HACC-eligible.
WRONG!


NSW HEALTH
HACC Client
Any person who:
• lives in the Australian community; and
• has difficulty in performing every-day tasks (eg. dressing, preparing meals, house cleaning); and
• without basic maintenance and support services, would be at risk of premature or inappropriate long term residential care.


NSW HEALTH
HACC Client
These include:
• older and frail persons
– frail persons aged 65 years and over
– frail Aboriginal and Torres Strait Islanders aged 45 years and over
• persons of any age with moderate, severe or profound disabilities.

Attendance Status Data Domain

Excerpt from Data Dictionary and collection Guidelines for the NSW Health Home and Community Care (HACC) Minimum Data Set Version 2

ATTENDANCE STATUS DATA DOMAIN:

1.0	Client/Carer and service provider attended appointment/service provided
2.0	Service provider present, but Client/Carer failed to attend/service not provided
3.0	Client/Carer failed to wait for service provider to attend/service not provided
4.0	Client/Carer deceased/service not provided
5.1	Service Event cancelled/deferred by Client/Carer – Client/Carer unavailable
5.2	Service Event cancelled/deferred by Client/Carer – Client/Carer unfit
5.3	Service Event cancelled/deferred by Client/Carer – service provision not required
6.1	Service Event cancelled/deferred by service provider – equipment not available
6.2	Service Event cancelled/deferred by service provider – drugs not available
6.3	Service Event cancelled/deferred by service provider – other resources not available
6.4	Service Event cancelled/deferred by service provider – planned closure of Agency
6.5	Service Event cancelled/deferred by service provider – planned service reduction
6.6	Service Event cancelled/deferred by service provider – planned absence of service provider
6.7	Service Event cancelled/deferred by service provider – unplanned absence of service provider
6.8	Service Event cancelled/deferred by service provider – appointment made in administrative error

Guide for use:

Code 1.0: Client/Carer and service provider attended appointment/service provided – to be used when the service was provided, with the Client/Carer and service provider present.

Code 2.0: Service provider present, but Client/Carer failed to attend/service not provided – to be used when the service provider was present to provide the service, but the Client/Carer failed to attend (without notice), resulting in the service not being provided.

Code 3.0: Client/Carer failed to wait for service provider to attend/service not provided – to be used when the Client/Carer failed to wait for the service provider to attend, resulting in the service not being provided.

Code 5.1: Service Event cancelled/deferred by Client/Carer–Client/Carer unavailable – to be used when the Client/Carer cancelled/deferred the appointment on or before the scheduled date due to the Client/Carer being unavailable.

Code 5.2: Service Event cancelled/deferred by Client/Carer–Client/Carer unfit – to be used when the Client/Carer cancelled/deferred the appointment on or before the scheduled date due to the Client/Carer being unfit/unwell.

Code 5.3: Service Event cancelled/deferred by Client/Carer – service provision not required – to be used when the Client/Carer cancelled/deferred the appointment on or before the scheduled date due to the Client/Carer not requiring service provision.

Code 6.1: Service Event cancelled/deferred by service provider–equipment not available – to be used when the service provider cancelled/deferred the appointment on or before the scheduled date due to clinical equipment required for service provision not being available.

Code 6.2: Service Event cancelled/deferred by service provider–drugs not available – to be used when the service provider cancelled/deferred the appointment on or before the scheduled date due to drugs or other medicines required for service provision not being available.

Code 6.3: Service Event cancelled/deferred by service provider – other resources not available – to be used when the service provider cancelled/deferred the appointment on or before the scheduled date due to resources (other than equipment or drugs) required for service provision not being available.

Code 6.4: Service Event cancelled/deferred by service provider–planned closure of Agency – to be used when the service provider cancelled/deferred the appointment on or before the scheduled date due to a planned closure of the Agency, requiring existing appointments to be rescheduled/redirected.

Code 6.5: Service Event cancelled/deferred by service provider – planned service reduction – to be used when the service provider cancelled/deferred the appointment on or before the scheduled date due to planned service reduction by the Agency (eg, the number of hours of service availability are reduced, requiring existing appointments to be moved into available hours).

Code 6.6: Service Event cancelled/deferred by service provider–planned absence of service provider – to be used when the service provider cancelled/deferred the appointment on or before the scheduled date due to planned absence by the service provider (eg, annual leave, conference leave), requiring existing appointments to be rescheduled/redirected.

Code 6.7: Service Event cancelled/deferred by service provider – unplanned absence of service provider – to be used when the Client/Carer was/were present to receive the service, but the service provider failed to attend (without notice) (eg, sick leave) and no available alternative service provider was available, resulting in the service not being provided.

Code 6.8: Service Event cancelled/deferred by service provider – appointment made in administrative error – to be used when the appointment was made in error.

Main Reason for Cessation of Services Data Domain

Excerpt from Data Dictionary and Collection Guidelines for the NSW Health Home and Community Care (HACC) Minimum Data Set Version 2

MAIN REASON FOR CESSATION OF SERVICE EPISODE

Guide for use: Whilst a Service Episode may continue for the provision of services to a Carer after the provision of services to the Client has ceased, the Main reason for Cessation of Service Episode is to be collected in respect to the main reason why service provision to the Client was ceased.

Each category applies to particular circumstances, as follows:

Code 01: Service completed – improved Client status – to be used when the Client no longer needs formal assistance. This includes situations where the needs for assistance from the Agency have reduced to the point where the Client can manage on their own, where assistance is being provided by one or more informal carers (family, friends, etc), where the Client only requires temporary or ad hoc assistance, or where the Client ceased to participate by mutual agreement and where the service is no longer required.

Code 02: Transferred/referred to another service – improved Client status – to be used when the Client no longer needs assistance from the Agency, but still requires some formal assistance from another Agency (eg, a person's condition has improved and they no longer require nursing care, but need formal assistance from another service provider).

Code 03: Agency cannot or will no longer provide assistance– Client needs unchanged – to be used when the Client need for assistance has not changed, but the Agency has ceased to provide assistance to the Client because of Agency resource limitations or other circumstances. Includes situations where the Agency no longer considers it safe for the Agency workers or volunteers to continue to assist the Client. Safety issues may relate to the physical setting of service delivery (eg, unsafe or unsanitary dwelling) or concerns with the physical or emotional wellbeing of the worker or volunteer due to the behaviour of the Client. Excludes situations where the increased level of Client need/dependency led to a transfer/referral to another service or program that provides a higher level of community care.

Code 04: Client terminated service by mutual agreement – Client needs unchanged – to be used when the Client need for assistance has not changed, but the Client has ceased to participate in receiving further assistance from the Agency by mutual agreement with the service provider, and the Client ceases by choice, and not as the result of any assessment of need or change in the external circumstances of the Client (ie, if the Client had not made this choice, they would have continued to receive assistance from the Agency). Excludes situations where the Client moved out of the geographic area of coverage of the Agency.

Code 05: Transferred/referred to residential aged care – Client needs changed – to be used when the increasing dependency or need for assistance of the Client has reached the point where the Agency can no longer provide the necessary assistance, and the Client is referred to residential aged care (nursing home or hostel).

Code 06: Transferred/referred to other institutional setting – Client needs changed – to be used when the increasing dependency or need for assistance of the Client has reached the point where the Agency can no longer provide the necessary assistance, and the Client is referred to a more appropriate source of institutional care (other than residential aged care).

Code 07: Transferred/referred to other community-based service – Client needs changed – to be used when the increasing dependency or need for assistance of the Client has reached the point where the Agency can no longer provide the necessary assistance, and the Client is referred to a more appropriate source of community care. This includes referrals to a Community Aged Care Package provider or a Community Options (or Linkages) project.

Code 08: Client moved out of area – to be used when the Client ceased to receive assistance from the Agency because the Client moved out of the geographic area of coverage of the Agency. That is, the reason the Agency ceases to assist the Client is primarily because of a change in the residential location of the Client, and not because of any change in their need for assistance.

Code 09: Client left without notice – to be used when the Client has ceased to participate in receiving further assistance from the Agency, without providing any prior notice of their intention to stop participating.

Code 10: Client left against advice – to be used when the service provider is aware of the intention of the Client to stop participating in receiving further assistance from the Agency, and the Client ceases despite advice from service provider that such action is against their best interests.

Primary Type of Assistance Received Data Domain

Excerpt from Data Dictionary and Collection Guidelines for the NSW Health Home and Community Care (HACC) Minimum Data Set Version 2

PRIMARY TYPE OF ASSISTANCE RECEIVED DATA DOMAIN:

01	Assessment (including screening)-Client	56	Podiatry
02	Assessment (including screening)-Carer	60	Hearing assessment
10	Case management	66	Occupational therapy
21	Client care co-ordination-Client	67	Physiotherapy
22	Client care co-ordination-Carer	68	Diversional therapy
31	Counselling/support, information, referral and advocacy-Client	69	Speech pathology
		70	Dietetics/nutrition
32	Counselling/support, information, referral and advocacy-Carer	71	Social work
		78	General and other nursing support
41	Domestic assistance	79	Other support by Allied Health professional
42	Social support/dementia monitoring		
43	Personal care	81	Meals
45	Centre-based day care	82	Other food services
46	Respite care	85	Formal linen service
51	Continence care	88	Home maintenance
52	Dementia nursing	89	Home modification
53	Palliative care generalist nursing	90	Provision of goods and equipment
54	Wound management	95	Transport-Client
55	Foot care	96	Transport-Carer

Code 01: Assessment (including screening) - Client
and
Code 02: Assessment (including screening) - Carer –

1. Assessment for eligibility is the matching of client characteristics against program and agency guidelines. Depending on the extent or clinical nature of these guidelines, this might be done at the initial contact point or by designated assessors or clinicians*.
   Related activities will include:
   Determination of eligibility for service provision by matching of client characteristics against program and agency guidelines.
2. Assessment for support needs is divided into two parts, the first being a means of identifying need in broad terms, but without depth of investigation. This is an initial screening process. It may be followed by more in-depth assessment. Taken together, these two levels of assessment identify the range of appropriate potential response options.
   Related activities will include:
   Completion of the Functional Screening Tool.
   Undertaking service level or comprehensive assessment as required, using current best practice tools.
3. Assessment for service response refers to the identification of proposed service delivery. It may include case planning.
   Related activities will include:
   Development and coordination of services identified in Assessment Element 2 (identification of support needs)
   Development of care plans
   Identification of occupational safety and health issues
   Referral to more appropriate programs for clients needing more than basic support services or specialist assessments and programs.
4. Priority allocation is not a separate assessment process, but an outcome of an analysis of the combination of the needs and risks associated with a given client.
   Activities will include:
   Within an identified targeting strategy, allocation for service priority relative to other prospective service users.

Code 10: Case management –

I. Case Management refers to a collaborative and client focussed process for managing support provision to people with chronic, ongoing or complex conditions or situations. It includes processes of assessment, care planning, implementation, monitoring and case closure and uses a planned approach to achieve an optimal and agreed client outcome and maximum independence in a cost effective way.

II. Case Management projects specifically target:
   People who have a range of interacting physical/medical, social and emotional needs, usually regarded as complex needs, and who require comprehensive assessment and formal case management.
   People who need short term, ongoing or periodic assistance from a case manager to organise and co-ordinate community care services.
   People whose needs can rapidly change and who need a case manager to monitor their situation and ensure a quick and flexible service response when needed.
   People who need specific types, mixes or levels of support services that are not usually provided by community care services and who nee a case manager to help organise them. These special needs can be due to their ethnic or Aboriginal background, dementia or geographic isolation.
   The carers of these people.

Code 21: Client care co-ordination – Client
and
Code 22: Client care co-ordination-Carer –

Description of the service

I. Client Care Coordination (formerly known as Case Planning/Review and Coordination) refers to the coordination of activities undertaken to facilitate access to HACC services for clients who need help to gain access to more than one service.

II. The client can be either the person who is cared for or the carer and the services can be provided separately or combined.

Code 31: Counselling/support, information, referral and advocacy-Client
and
Code 32: Counselling/support, information, referral and advocacy-Carer –

Description of the service

I. Counselling/Support, Information, Referral and Advocacy refer to assistance with understanding and managing situations, behaviours and relationships associated with the person's need for care and/or the caring role. The client can be either the person who is cared for or the carer.

II. These services can be provided separately or combined.

Code 41: Domestic assistance –

Description of the service

Domestic Assistance refers to assistance with domestic chores, including assistance with cleaning, dish-washing, clothes washing and ironing, shopping and bill paying for a safe secure healthy environment.

Code 42: Social support/dementia monitoring –

Description of the service

Social Support services refer to assistance provided by a companion (paid worker or volunteer), either within the home environment or while a person is accessing community services or facilities. The service is primarily directed towards meeting the person's need for social contact and/or accompaniment in order to participate in community life.

Code 43: Personal care –

Description of the service

Personal Care refers to assistance with daily self-care tasks in order to help a service user to maintain appropriate standards of hygiene and grooming.

Code 45: Centre-based day care –

Description of the service

Centre-based Day Care services refer to the provision of structured group activities to frail older people, designed to develop, maintain or support the capacity for independent living and social interaction, which are conducted in a day centre setting. Centre-based Day Care also includes group excursions/ activities conducted by centre staff, but held away from the centre.

Code 46: Respite care –

Description of the service

I. Respite refers to services that strengthen and maintain the primary care relationships between a frail older person or a younger person with a disability and their carers through the provision of flexible and responsive alternatives to the usual care arrangements. Services will be preventative in focus, time limited, and generally provided on a planned basis.

II. Whilst providing a respite effect for carers which is appropriate to their needs and circumstances, services will endeavour to ensure that respite activities are age appropriate and have positive benefits and outcomes for the frail older person, or person with a disability as well as their carers.

III. Unless otherwise specified, Respite services will be provided in the home of the client or in a host family home and where the usual carer is not present during the incident of service. Respite services are provided on a one-to-one individual basis. In the initial stages of the respite service, the carer may be present until trust and confidence is established between the client and carer and Respite worker.

Code 51: Continence care –

Description of the service

The diagnosis and treatment, by nursing, medical, surgical or exercise methods, of incontinence issues.

Code 52: Dementia nursing –

Description of the service

Dementia nursing refers to the provision of maintenance and support services and structured activities to people with dementia, designed to develop, maintain or support the capacity for independent living and social interaction which are conducted in the person's home. Such services provide valuable supports to people with dementing illnesses and their programs often directly or indirectly provide emotional support to the carers of people with dementia.

Code 53: Palliative care generalist nursing –

Description of the service

Palliative care generalist nursing refers to the provision of comprehensive, coordinated, integrated range of client and family centred maintenance and support services for people who need palliative care, their families and carers, in a setting appropriate to their needs in the community, designed to develop, maintain or support the capacity for independent living and social interaction which are conducted in the person's home. Such services provide valuable supports to people with progressive advanced disease or terminal illnesses and their programs often directly or indirectly provide emotional support to the carers of people who need palliative care.

Code 54: Wound management –

Description of the service

Wound management refers to the provision of comprehensive, coordinated, integrated range of interdisciplinary wound care and management services that minimises the possibility of infection and scarring for people, in a setting appropriate to their needs in the community.

- Clinical assessment.
- Treatment.
- Therapy.
- Information.

Code 55: Foot care –

Service objectives

- To provide personalised limited foot and nail care to minimise the possibility of infection or complications arising from diabetes, supported by current validated research.
- To provide flexible, timely services that respond to the needs of clients.

Code 56: Podiatry –

Description of the service

Podiatry is the diagnosis and treatment, by medical, surgical, electrical, mechanical or manual methods, of ailments or abnormal conditions of the feet.

Code 60: Hearing assessment –

Description of the service

Hearing assessment is the assessment and diagnosis, by nursing, medical or electrical methods, of hearing difficulties.

Code 66: Occupational therapy –

Description of the service

Occupational Therapy refers to assessment and treatment through the specific use of selected activity. This is designed by the occupational therapist and undertaken by those who have a temporary or permanent disability. The purpose is to prevent disability, to improve health and to help the person to fulfil his or her needs by achieving optimum function and independence.

Code 67: Physiotherapy –

Description of the service

Physiotherapy involves the assessment, diagnosis, treatment and prevention of disorders of human movement with special emphasis on the neurological, musculo-skeletal and cardiovascular systems.

Code 68: Diversional therapy –

Description of the service

Diversional therapy involves the provision of leisure and recreational activities designed to support, challenge and enhance the psychological, spiritual, social, emotional and physical well-being of persons in a setting appropriate to their needs in the community.

Code 69: Speech pathology –

Description of the service

Speech Pathology is concerned with the assessment, diagnosis and treatment of individuals with speech disorders, eating and drinking difficulties and swallowing difficulties.

Code 70: Dietetics/nutrition –

Description of the service

Dietetics/nutrition refers to all aspects of the food and nutritional care of individuals and groups. It assists people to meet their individual needs within their own psychological, cultural and economic environments

Code 71: Social work –

Description of the service

Social work services refer to the provision of a comprehensive, coordinated and integrated range of services and support for persons, their families and carers, to optimise social functioning and to deal with illness, injury or abuse in a setting appropriate to their needs in the community.

Code 78: General and other nursing support –

To be used for nursing services provided to a Client and/or Carer, other than that provided as part of a speciality/type of assistance listed above.

Code 79: Other support by Allied Health professional –

To be used for allied health services provided to a Client and/or Carer, other than that provided as part of a speciality/type of assistance listed above.

Code 81: Meals –

Description of the service

Meals services refer to the preparation and delivery of meals or other food items that contribute to meeting a client's daily nutrition requirements.

Code 82: Other food services –

To be used for food services provided to a Client and/or Carer, other than 'Dietetics/nutrition' (code '70') or 'Meals' (code '81') listed above.

Description of the service

Other food services refer to other support activities that contribute to the client's capacity to meet their daily nutritional requirements.

Code 85: Formal linen service –

Description of the service

Formal Linen Service refers to the provision of and laundering of linen, usually by a separate laundry facility or hospital, to assist in the day-to-day management of a client's incontinence.

Code 88: Home maintenance –

Description of the service

I. Home Maintenance refers to assistance with maintenance and repair to the homes, gardens and yards of frail older people, younger people with a disability and their carers, to help them to cope with a disabling condition and to keep the home in a safe and habitable condition.

II. This service is primarily aimed at assisting clients with tasks that they would formerly have done for themselves when they had no functional disability.

III. This service is not a substitute for long-standing neglect by the home owner nor is it a substitute for the normal maintenance that is the responsibility of home owners, although services may assist home owners to access those services.

Code 89: Home modification –

Description of the service

Home Modification refers to assistance with modifications and renovations to the homes, gardens and yards of frail older people, younger people with a disability or their carers to help them to cope with a disabling condition and to keep the home in a safe and habitable condition.

Code 90: Provision of goods and equipment –

Description of the service

Goods and Equipment services refer to the loan or purchase of goods and equipment that help the client with their mobility, communication, reading, personal care or health care.

Code 95: Transport-Client
and
Code 96: Transport-Carer

Description of the service

I. Transport services are provided for frail older people, younger people with a disability and their carers who require transport services with appropriate support to enable them to remain living independently in the community. Transport services support access to community activities and services. Assistance with transport may be provided either directly or indirectly (eg, taxi voucher or subsidies, or brokered through other transport providers).

II. Transport service may be provided on an individual or group basis (see below under Definitions).

Source of Referral Data Domain

Excerpt from Data Dictionary and Collection Guidelines for the NSW Health Home and Community Care (HACC) Minimum Data Set Version 2

SOURCE OF REFERRAL DATA DOMAIN:

- 00 Self referral - no formal or informal referral
- 01 Public hospital
- 07 Private hospital
- 10 Psychiatric hospital
- 12 Multi-Purpose Service
- 18 Other hospital or day procedure centre
- 21 Community mental health service (residential)
- 22 Palliative care facility/hospice (residential)
- 25 Extended care/rehabilitation facility
- 26 Residential aged care facility (government)
- 27 Residential aged care facility (non-government)
- 28 Other residential care service
- 31 Emergency services
- 35 Day care centre/respite care centre
- 41 Professional personal carer
- 45 Private practice, medical general practice
- 48 Private practice, other
- 51 Community mental health service (non-residential)
- 52 Community palliative care service (non-residential)
- 53 Specialist aged or disability assessment team/service
- 54 Aboriginal and Torres Strait Islander Health Service
- 55 Community/domiciliary nursing service
- 56 Community/domiciliary allied health service
- 58 Other non-residential community health service
- 61 Comprehensive HACC assessment authority
- 62 DVA home care service
- 63 Carelink Centre
- 67 Law enforcement/criminal justice
- 68 Other community-based non-health government service agency
- 71 Other Aboriginal and Torres Strait Islander community-based service agency (eg, LALC/AHO)
- 78 Other community-based non-government service agency
- 91 Community transport service
- 92 Home maintenance/modifications service
- 93 Meals service
- 94 Community Options Program service (COPS)
- 95 Community/Aged Care Package service
- 98 Other source of referral
- 99 Family member/friend/significant other - informal referral only

Guide for use: The Source of referral should be recorded for each Client and, if there is one, each Carer.

If a Client and/or a Carer is referred to the Agency from multiple sources, then a Source of referral should be recorded for each referral.

If a Client and a Carer is referred to the Agency from a source, then a Source of referral should be recorded against both the Client and the Carer.

If a Client and/or a Carer was not referred to the Agency, the Source of referral should be recorded as either '00' – 'Self referral - no formal or informal referral' or '99' – 'Family member/friend/significant other - informal referral only', as appropriate.

The referral may be interpreted informally (ie, not requiring a written or phone referral). For clarification, the Client and Carer should be asked: Where, or from whom, did you hear of this service?

Code 00: Self referral - no formal or informal referral – to be used where the Client and/or their Carer self-referred themselves to the Agency (ie, was/were neither formally nor informally referred).

Code 01: Public hospital – excludes Mental Health admitted patient units – code to '10' - 'Psychiatric hospital' and excludes Palliative Care admitted patient units – code to '22' - 'Palliative care facility/hospice (residential)'.

Code 07: Private hospital – excludes Mental Health admitted patient units – code to '10' - 'Psychiatric hospital' and excludes Palliative Care admitted patient units – code to '22' - 'Palliative care facility/hospice (residential)'.

Code 10: Psychiatric hospital – includes Mental Health admitted patient units within a Multi-Purpose Service, acute and non-acute inpatient facilities.

Code 12: Multi-Purpose Service – includes residential aged care settings and admitted patient units within a Multi-Purpose Service.

Code 18: Other hospital or day procedure centre – includes Same Day Surgery centres, specialised dialysis centres, standalone endoscopy clinics, etc.

Code 21: Community mental health service (residential) – includes settings in which persons reside temporarily at an accommodation unit providing support, non-acute care and other services to people with particular personal, social or behavioural problems.

Code 22: Palliative care facility/hospice (residential) – a service or facility specifically structured to provide palliative care in either community residential or institutional settings. Includes Palliative Care admitted patient units within a Multi-Purpose Service, acute and non-acute inpatient facilities.

Code 26: Residential aged care facility (government) – includes government owned/operated high care (nursing home) and low care (hostel). Excludes residential aged care settings in a Multi-Purpose Service – code to '12' - 'Multi-Purpose Service'.

Code 27: Residential aged care facility (non-government) – includes non-government high care (nursing home) and low care (hostel).

Code 31: Emergency services – includes ambulance service, flying doctor service, rescue service, Mental Health Crisis Team and other emergency service provider.

Code 45: Private practice, medical general practice – includes vocationally registered general practitioners, vocationally registered general practitioner trainees and GP services co-located within an acute care hospital.

Code 48: Private practice, other – health professionals operating in private practice. Excludes medical general practitioners – code to '45' - 'Private practice, medical general practice', community/domiciliary nursing services – code to '55' - 'Community/domiciliary nursing service' and community/domiciliary allied health services – code to '56' - 'Community/ domiciliary allied health service'.

Code 51: Community mental health service (non-residential) – includes non-residential services providing support, non-acute care and other services to people with particular personal, social or behavioural problems.

Code 52: Community palliative care service (non-residential) – a service specifically structured to provide palliative care in the community (non-residential).

Code 53: Specialist aged or disability assessment team/service – includes Aged Care assessment Team (ACAT).

Code 61: Comprehensive HACC assessment authority – includes DADHC Home Care Service Referral and Assessment Centre and DADHC HACC Assessment Centre.

Code 67: Law enforcement/criminal justice – includes police cells, law courts, correctional settings/ prisons, Periodic Detention centres, and Diversion initiatives such as Cannabis Cautioning Scheme, Home Detention, Magistrates Early Referral Into Treatment (MERIT).

Code 68: Other community-based non-health government service agency – includes public schools, universities and colleges.

Code 78: Other community-based non-government service agency –includes private schools and colleges.

Code 93: Meals service – includes Meals on Wheels.

Code 95: Community/Aged Care Package service – includes Community Package (ComPack), Transitional Aged Care Package (TACP) and Community Aged Care Package (CACP). Excludes Community Options Program service (COPS).

Code 98: Other source of referral – to be used where the Client and/or their Carer was referred from a source not listed above.

Code 99: Family member/friend/significant other - informal referral only – to be used where the Client and/or their Carer was informally referred to the Agency by a family member/friend/ significant other and there was no formal or informal referral of the Client and/or their Carer to the Agency by any other source.

Target of Referral Data Domain

Excerpt from Data Dictionary and collection Guidelines for the NSW Health Home and Community Care (HACC) Minimum Data Set Version 2

TARGET OF REFERRAL DATA DOMAIN:

01	Public hospital	55	Community/domiciliary nursing service
07	Private hospital	56	Community/domiciliary allied health service
10	Psychiatric hospital	58	Other non-residential community health service
12	Multi-Purpose Service	61	Comprehensive HACC assessment authority
18	Other hospital or day procedure centre	62	DVA home care service
21	Community mental health service (residential)	63	Carelink Centre
22	Palliative care facility/hospice (residential)	67	Law enforcement/criminal justice
25	Extended care/rehabilitation facility	68	Other community-based non-health government service agency
26	Residential aged care facility (government)	71	Other Aboriginal and Torres Strait Islander community-based service agency (eg, LALC/AHO)
27	Residential aged care facility (non-government)	78	Other community-based non-government service agency
28	Other residential care service	91	Community transport service
31	Emergency services	92	Home maintenance/modifications service
35	Day care centre/respite care centre	93	Meals service
41	Professional personal carer	94	Community Options Program service (COPS)
45	Private practice, medical general practice	95	Community/Aged Care Package service
48	Private practice, other	98	Other target of referral
51	Community mental health service (non-residential)	99	No referral
52	Community palliative care service (non-residential)		
53	Specialist aged or disability assessment team/service		
54	Aboriginal and Torres Strait Islander Health Service		

Guide for use: The Target of referral should be recorded for each Client and, if there is one, each Carer. If a Client and/or a Carer is referred (out) by the Agency to multiple sources, then a Target of referral should be recorded for each referral. If a Client and a Carer is referred (out) by the Agency to a source, then a Target of referral should be recorded against both the Client and the Carer. If a Client and/or a Carer was not referred (out) by the Agency, the Target of referral should be recorded as '99' – 'No referral'. The referral may be interpreted informally (ie, not requiring a written or phone referral).

Code 01: Public hospital – excludes Mental Health admitted patient units – code to '10' - 'Psychiatric hospital' and excludes Palliative Care admitted patient units – code to '22' - 'Palliative care facility/hospice (residential)'.

Code 07: Private hospital – excludes Mental Health admitted patient units – code to '10' - 'Psychiatric hospital' and excludes Palliative Care admitted patient units – code to '22' - 'Palliative care facility/hospice (residential)'.

Code 10: Psychiatric hospital – includes Mental Health admitted patient units within a Multi-Purpose Service, acute and non-acute inpatient facilities.

Code 12: Multi-Purpose Service – includes residential aged care settings and admitted patient units within a Multi-Purpose Service.

Code 18: Other hospital or day procedure centre – includes Same Day Surgery centres, specialised dialysis centres, standalone endoscopy clinics, etc.

Code 21: Community mental health service (residential) – includes settings in which persons reside temporarily at an accommodation unit providing support, non-acute care and other services to people with particular personal, social or behavioural problems.

Code 22: Palliative care facility/hospice (residential) – a service or facility specifically structured to provide palliative care in either community residential or institutional settings. Includes Palliative Care admitted patient units within a Multi-Purpose Service, acute and non-acute inpatient facilities.

Code 26: Residential aged care facility (government) – includes government owned/operated high care (nursing home) and low care (hostel). Excludes residential aged care settings in a Multi-Purpose Service – code to '12' - 'Multi-Purpose Service'.

Code 27: Residential aged care facility (non-government) – includes non-government high care (nursing home) and low care (hostel).

Code 31: Emergency services – includes ambulance service, flying doctor service, rescue service, Mental Health Crisis Team and other emergency service provider.

Code 45: Private practice, medical general practice – includes vocationally registered general practitioners, vocationally registered general practitioner trainees and GP services co-located within an acute care hospital.

Code 48: Private practice, other – health professionals operating in private practice. Excludes medical general practitioners – code to '45' - 'Private practice, medical general practice', community/domiciliary nursing services – code to '55' - 'Community/domiciliary nursing service' and community/domiciliary allied health services – code to '56' - 'Community/domiciliary allied health service'.

Code 51: Community mental health service (non-residential) – includes non-residential services providing support, non-acute care and other services to people with particular personal, social or behavioural problems.

Code 52: Community palliative care service (non-residential) – a service specifically structured to provide palliative care in the community (non-residential).

Code 53: Specialist aged or disability assessment team/service – includes Aged Care assessment Team (ACAT).

Code 61: Comprehensive HACC assessment authority – includes DADHC Home Care Service Referral and Assessment Centre and DADHC HACC Assessment Centre.

Code 67: Law enforcement/criminal justice – includes police cells, law courts, correctional settings/prisons, Periodic Detention centres, and Diversion initiatives such as Cannabis Cautioning Scheme, Home Detention, Magistrates Early Referral Into Treatment (MERIT).

Code 68: Other community-based non-health government service agency – includes public schools, universities and colleges.

Code 78: Other community-based non-government service agency –includes private schools and colleges.

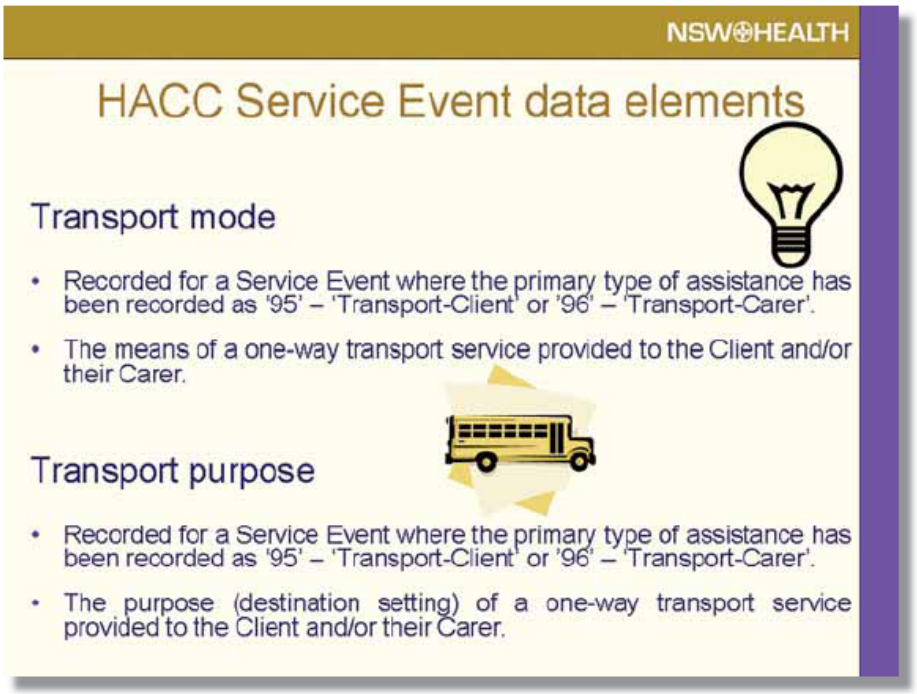
Code 93: Meals service – includes Meals on Wheels.

Code 95: Community/Aged Care Package service – includes Community Package (ComPack), Transitional Aged Care Package (TACP) and Community Aged Care Package (CACP). Excludes Community Options Program service (COPS).

Code 98: Other target of referral – to be used where the Client and/or their Carer was referred to a source not listed above.

Code 99: No referral – to be used where the Client and/or their Carer was/were not referred (out) by the Agency either during or at the cessation of the Service Episode.

Transport Mode Data Domain


NSW HEALTH
HACC Service Event data elements
Transport mode
• Recorded for a Service Event where the primary type of assistance has been recorded as '95' – 'Transport-Client' or '96' – 'Transport-Carer'.
• The means of a one-way transport service provided to the Client and/or their Carer.
Transport purpose
• Recorded for a Service Event where the primary type of assistance has been recorded as '95' – 'Transport-Client' or '96' – 'Transport-Carer'.
• The purpose (destination setting) of a one-way transport service provided to the Client and/or their Carer.

Excerpt from Data Dictionary and collection Guidelines for the NSW Health Home and Community Care (HACC) Minimum Data Set Version 2

TRANSPORT MODE DATA DOMAIN:

11	Ambulance - owned by Agency/service provider	32	Car - operated by private operator
12	Ambulance - operated by Ambulance Service of NSW	38	Car - other
		48	Taxi
17	Ambulance - operated by private operator	51	Aircraft - owned by Agency/service provider
18	Ambulance - other	52	Aircraft - operated by Ambulance Service of NSW
21	Bus - owned by Agency/service provider	57	Aircraft - operated by private operator
22	Bus - operated by State Transit Authority of NSW	58	Aircraft - other
27	Bus - operated by private operator	68	Watercraft
28	Bus - other	78	Train
31	Car - owned by Agency/service provider	98	Other

Guide for use: Collection of this data element is required only where the Primary type of assistance received has been recorded as '95' – 'Transport-Client' or '96' – 'Transport-Carer'.

Code 11: Ambulance–owned by Agency/service provider – to be used where transport assistance is provided to a Client and/or their Carer using an ambulance owned by the Agency/service provider.

NSW HEALTH Orientation Work Book for NSW Health HACC MDS v2 PAGE 125

Code 12: Ambulance – operated by Ambulance Service of NSW – to be used where transport assistance is provided to a Client and/or their Carer using an ambulance/patient transport vehicle operated by the Ambulance Service of NSW.

Code 17: Ambulance – operated by private operator – to be used where transport assistance is provided to a Client and/or their Carer using an ambulance operated by a private operator.

Code 18: Ambulance – other – to be used where transport assistance is provided to a Client and/or their Carer using an ambulance operated by any other provider.

Code 21: Bus – owned by Agency/service provider – to be used where transport assistance is provided to a Client and/or their Carer using a bus or mini-bus owned by the Agency/service provider.

Code 22: Bus – operated by State Transit Authority of NSW – to be used where transport assistance is provided to a Client and/or their Carer using a bus operated by the State Transit Authority of NSW (STA).

Code 27: Bus – operated by private operator – to be used where transport assistance is provided to a Client and/or their Carer using a bus or mini-bus operated by a private operator.

Code 28: Bus – other – to be used where transport assistance is provided to a Client and/or their Carer using a bus or mini-bus owned/operated by any other provider, including a brokerage bus or mini-bus.

Code 31: Car – owned by Agency/service provider – to be used where transport assistance is provided to a Client and/or their Carer using a car owned by the Agency/service provider.

Code 32: Car – owned by the Client/Carer – to be used where transport assistance is provided to a Client and/or their Carer using a car or other type of vehicle owned by the Client/Carer.

Code 38: Car – other – to be used where transport assistance is provided to a Client and/or their Carer using a car owned/operated by any other provider.

Code 48: Taxi – to be used where transport assistance is provided to a Client and/or their Carer using a taxi vehicle (car or bus) or taxi voucher. Includes water taxi.

Code 51: Aircraft – owned by Agency/service provider – to be used where transport assistance is provided to a Client and/or their Carer using an aircraft owned by the Agency/service provider.

Code 52: Aircraft – operated by Ambulance Service of NSW – to be used where transport assistance is provided to a Client and/or their Carer using an aircraft operated by the Ambulance Service of NSW.

Code 57: Aircraft – operated by private operator – to be used where transport assistance is provided to a Client and/or their Carer using an aircraft operated by a private operator.

Code 58: Aircraft – other – to be used where transport assistance is provided to a Client and/or their Carer using an aircraft operated by any other provider.

Code 68: Watercraft – to be used where transport assistance is provided to a Client and/or their Carer using a watercraft. Excludes water taxi.

Code 78: Train – to be used where transport assistance is provided to a Client and/or their Carer using a train, tram/light rail or monorail.

Code 98: Other – to be used where transport assistance is provided to a Client and/or their Carer using a means of transport not listed above.

TRANSPORT PURPOSE DATA DOMAIN:

00	To Client's/Carer's home	48	To private practice, other
01	To public hospital	51	To community mental health service (non-residential)
07	To private hospital	52	To community palliative care service (non-residential)
10	To psychiatric hospital	54	To Aboriginal and Torres Strait Islander Health Service
12	To Multi-Purpose Service	57	To Community Health Centre
18	To other hospital or day procedure centre	58	To other non-residential community health service
21	To community mental health service (residential)	67	To law enforcement/criminal justice
22	To palliative care facility/hospice (residential)	81	To recreational/social facility
25	To extended care/rehabilitation facility	82	To shopping facility
26	To residential aged care facility (government)	88	To other public place (street, park, etc)
27	To residential aged care facility (non-government)	98	To other location
28	To other residential care service		
35	To day care centre/respite care centre		
45	To private practice, medical general practice		

Guide for use: Collection of this data element is required only where the Primary type of assistance received has been recorded as '95' – 'Transport-Client' or '96' – 'Transport-Carer'.

Code 00: To Client's/Carer's home – to be used where transport assistance is provided to a Client and/or their Carer to the Client's or Carer's usual place of residence. Excludes where the Client's or Carer's usual place of residence is listed in any other residential category below (ie, codes 01-28, code 67 and code 88).

Code 01: To public hospital – excludes Mental Health admitted patient units – code to '10' - 'To or from psychiatric hospital' and excludes Palliative Care admitted patient units – code to '22' - 'To or from palliative care facility/hospice (residential)'.

Code 07: To private hospital – excludes Mental Health admitted patient units – code to '10' - 'To or from psychiatric hospital' and excludes Palliative Care admitted patient units – code to '22' - 'To or from palliative care facility/hospice (residential)'.

Code 10: To psychiatric hospital – includes Mental Health admitted patient units within a Multi-Purpose Service, acute and non-acute inpatient facilities.

Code 12: To Multi-Purpose Service – includes residential aged care settings and admitted patient units within a Multi-Purpose Service.

Code 18: To other hospital or day procedure centre – includes Same Day Surgery centres, specialised dialysis centres, standalone endoscopy clinics, etc.

Code 21: To community mental health service (residential) – includes settings in which persons reside temporarily at an accommodation unit providing support, non-acute care and other services to people with particular personal, social or behavioural problems.

Code 22: To palliative care facility/hospice (residential) – a service or facility specifically structured to provide palliative care in either community residential or institutional settings. Includes Palliative Care admitted patient units within a Multi-Purpose Service, acute and non-acute inpatient facilities.

Code 26: To residential aged care facility (government) – includes government owned/operated high care (nursing home) and low care (hostel). Excludes residential aged care settings in a Multi-Purpose Service – code to '12' - 'To or from Multi-Purpose Service'.

Code 27: To residential aged care facility (non-government) – includes non-government high care (nursing home) and low care (hostel).

Code 45: To private practice, medical general practice – includes vocationally registered general practitioners, vocationally registered general practitioner trainees and GP services co-located within an acute care hospital.

Code 48: To private practice, other – health professionals operating in private practice. Excludes medical general practitioners – code to '45' - 'To or from private practice, medical general practice'.

Code 51: To community mental health service (non-residential) – includes non-residential services providing support, non-acute care and other services to people with particular personal, social or behavioural problems.

Code 52: To community palliative care service (non-residential) – a service specifically structured to provide palliative care in the community (non-residential).

Code 67: To law enforcement/criminal justice – includes police cells, law courts, correctional settings/prisons, Periodic Detention centres, and Diversion initiatives such as Cannabis Cautioning Scheme, Home Detention, Magistrates Early Referral Into Treatment (MERIT).

Code 98: To other location – to be used where transport assistance is provided to a Client and/or their Carer for a purpose not listed above.

Most used/Common Codes for SNACC

The codes are listed in the user guide or HACC Data Dictionary

SERVICE CATEGORY

3 ACAT/ HACC

CASE TYPE

4 GEM

SOURCE OF REFERRAL/ REFERRALS OUT

(same codes used for both these domains)
Most are self explanatory but some we have interpreted include:

25 EXTENDED CARE FACILITY/REHABILITATION FACILITY (we use for internal referrals)
48 PRIVATE PRACTICE (if referring to a private OT, physio etc for a DVA client)
61 COMPREHENSIVE HACC ASSESSMENT AUTHORITY (we use this for Home Care)
68 OTHER COMMUNITY BASED NON HEALTH GOVERNMENT SERVICE AGENCY (so these organisations are not a health service but are still government funded eg a school)
78 OTHER COMMUNITY BASED NON GOVERNMENT SERVICE AGENCY (so these organisations are neither health nor government funded) we tend to call our Community Aid Agencies this code as they are usually Church or Charity groups and whilst they use government funding they are not government departments)
95 COMMUNITY/AGED CARE PACKAGE SERVICE (we put this if we have referred for a CACP or EACH) (we do not put this if we have approved for these services but have not referred on ie if inactive on our waiting list)

PRIMARY ASSISTANCE RECEIVED:

How can we differentiate Case management, Assessment and Client care co-ordination as assistance types?
Case Management refers to a collaborative and Client-focussed process for managing support provision to people with chronic, ongoing or complex conditions. This usually involves a case manager and several other key persons in determining support provisions needed by a Client. Record Case management for a Community Options model only.

Assessment refers to activities of eligibility and access to services that are attributable to individual care recipients (Clients and/or Carers). This varies from Agency to Agency, but can be related to updating Client records regarding eligibility, support needs, service response and prioritising service provision. Record this only if time spent is 30 minutes or more.

Client Care Coordination refers to the coordination of activities undertaken to facilitate access to HACC services for Clients who need help to gain access to more than one assistance type. Record this only if time spent is 30 minutes or more (if less, record as Counselling/support, information, referral and advocacy-Client).

For a more comprehensive differentiation between the above primary assistance types, please refer to pages 211-213 of the Data Dictionary and Collection Guidelines for the NSW Health HACC MDS v2, which can be found at: http://www.health.nsw.gov.au/data/hacc.

PRIMARY ASSISTANCE RECEIVED:

01 ASSESSMENT client
02 ASSESSMENT carer
21 CARE COORDINATION client
22 CARE COORDINATION carer
31 COUNSELLING/SUPPPORT, INFORMATION client
32 COUNSELLING/SUPPORT, INFORMATION carer
THERAPY CODE for 56 podiatry, 66 OT, 67physio, 69 speech, 70 dietetics, 71 social work
90 GOODS AND EQUIPMENT
95 TRANSPORT client
96 TRANSPORT carer

ATTENDANCE STATUS

1.0 CLIENT/CARER AND SERVICE PROVIDER ATTENDED APPOINTMENT/SERVICE PROVIDED

CONTACT TYPE

1 FACE TO FACE
2 TELEPHONE
8 OTHER we use this for approval meetings/delegation

SERVICE DELIVERY SETTING

00 CLIENT/CARER HOME
01 PUBLIC HOSPITAL
02 PRIVATE HOSPITAL
25 EXTENDED CARE FACILITY/REHABILITATION FACILITY (this is what we call ourselves and so we use this when a client comes to our centre and when we are in a delegation meeting)
26 RESIDENTIAL CARE FACILITY GOVERNMENT
27 RESIDENTIAL CARE FACILITY NON GOVERNMENT (private)
The other codes are self explanatory and are listed in the user guide or HACC Data Dictionary

MAIN REASON FOR CESSATION OF SERVICE EPISODE

01 SERVICE COMPLETED improved client status no longer needs any formal assistance
02 TRANSFERRED/REFERRED TO ANOTHER SERVICE improved client status but still needs assistance from a formal agency
05 TRANSFERRED/REFERRED TO RESIDENTIAL AGED CARE client entering residential care
These codes are fairly self explanatory but we seem to use the above most often.

CARE COORDINATION

These are ACAT categories but it is not a problem if they have been completed for a HACC only client. The data for these is only exported when an ACCR exists for a client.

1 LEVEL 1 CARE COORDINATION (some follow up and monitoring less than once a week)
2 LEVEL 2 CARE COORDINATION (intensive involvement and follow up client has complex needs or no support networks more than once a week)
3 LEVEL 3 CARE COORDINATION (botH level 1 and level 2 care coordination has been provided at different times during the episode)
4 NO CARE COORDINATION PROVIDED

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